SOCIAL WORK

An Analysis of a Social Institution

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Frank H. Hankins, Editor

SOCIAL WORK

An Analysis of a Social Institution

BY HELEN LELAND WITMER

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Make for yourself a description of the thing under consideration, so as to see distinctly what kind of thing it is, in its substance, in its bareness, and tell yourself the proper name, and the names of the things of which it is composed, and into which it may be resolved. For nothing is so productive of the elevation of mind as to be able to examine methodically and candidly every object presented in life, and always to look at things to see at the same time what kind of world this is, and what use everything performs in it, and what value everything has in relation to the whole, and what with reference to the individual.

—MARCUS AURELIUS

PREFACE

This book was originally planned to tell undergraduate students, and others who are interested, what social work is about. In the way of that endeavor, however, one obstacle immediately appeared: it did not seem to be possible to say that this is social work, and that is not. To the outsider this will appear to be a very unusual situation: that a discipline and a body of practice exist whose subject matter is indeterminate. This, however, is the freely admitted state of affairs in social work. Not that social workers do not know what they are doing; rather, they are in disagreement with regard to the limits of their professional field. Crudely stated, the question is whether the term "social work" refers to the same activities as those comprehended under the term "social welfare," or whether it refers to a body of professional practice that has more precise boundaries. Included in that question is the subsidiary one of what those boundaries are.

Since these are questions that would have to be answered before one could present a neat, elementary exposition of the established and accepted facts about the theory and practice of social work, the original aim of writing a textbook about social work was abandoned and research was undertaken instead. This book in consequence records the development of an idea—an idea regarding the nature and function of social work. That it begins by posing a question and proceeds to successively closer approximations to an answer is, accordingly, no mere pedagogical device but a serious record of an attempt to discover what social work really is.

In the book the logic of the research method that was employed is described, and the basic hypothesis that was proposed to account for the "settled aspects" of the phenomenon in question is elaborated upon. It is proposed that the activities that all agree are social work shall be examined as those of a social institution, and that the function of that institution in the social structure of which it forms a part shall be carefully analyzed. In the process of following out that plan some of the disputed aspects of social work became clarified, for it appeared that some of the activities regarding whose inclusion in social work

there was question are really parts of other institutional systems, while others make the carrying out of the primary social work function possible. Thus the research resulted in at least a tentative answer to the question with which it started, and it now seems possible to be fairly definite regarding social work's nature and scope.

The book deals with three major topics: (1) the nature of the social work institution and the function it serves; (2) what circumstances and needs called it into existence and how its present basic principles were arrived at; (3) how its chief function is discharged in the various fields in which it now mainly operates. Readers who feel that the search for a definition of social work is unnecessary or who are willing, without going over the evidence, to accept the conclusions to which the research led may find it more satisfactory to start with the second topic (Part II of the book) or at least to omit in their reading of Part I the last two sections of Chapter I, all of Chapter V, and all except the last section of Chapter VI.

About every subject touched on in the book much more could be said. The general emphasis in selection and omission of material was deliberately chosen, however, with the objective of making the activities of social workers understandable to laymen and beginning students. It seemed important, for instance, that discussion of technical processes be kept at a minimum, for the effective practice of social work requires professional training, and techniques cannot be adequately explained or evaluated apart from clinical experience. At the same time the basic theories on which social work operates and the main lines of disagreement among practitioners had to be made clear if students were to attain anything like an adequate comprehension of why social workers act as they do. Such an analysis was also necessitated by the research objective: that of clarifying the nature and function of social work itself.

Also deliberately chosen was the emphasis on what social workers call direct work with clients. Some readers and teachers may feel that more should have been said about the auxiliary activities that occupy so much of a social worker's time. It seemed, however, that the nature and purpose of such activities are easily understood and already fairly well known, and that, moreover, when they are effective they usually stem from plans that clients themselves evolve. In addition it seemed important to stress the human element in the situations with which social work is concerned and to show that the clients and their problems are familiar to all of us.

For somewhat similar reasons attention was concentrated upon social case work rather than upon the other social work processes. This choice of subject matter followed from the discovery of social work's primary function. All social work activities and processes contribute to the carrying out of that function, but in social case work the function is most clearly revealed. It seemed, therefore, that once social case work was adequately analyzed and described, the other activities involved in the carrying out of the profession's function would be readily understood.

So much in explanation of why the book was organized and written in its present form. In addition I would emphasize that the concept of social work's function, here arrived at, is not put forward as a final formulation, for it is very likely that further study and wider application of the concept will result in a more succinct and all-embracing statement than has thus far been achieved. Furthermore, some of the specific deductions from the basic definition may prove to be incorrect. This, however, is a necessary limitation to the findings of all research, for not only is it impossible to work out the implications of a discovery for a wide field of practice but—more important—concepts and propositions are dynamic, with the result that their very statement may influence behavior in ways that cannot be foreseen.

In attempting to make acknowledgments to those to whom I am indebted for the ideas contained in this book I am embarrassed by numbers, for many people with whom I have not discussed these specific questions have unwittingly contributed much to the answers. From my colleagues in the Smith College School for Social Work and from the supervisors of our students in numerous agencies I received my basic tutoring in social case work theory, and from our students I learned what a struggle it is to discover what social work is about. Numerous others, in conversations and in writings, have helped to clarify my understanding and to show me where some of the areas of dispute about social work lie. It is impossible to give personal acknowledgment to all of these people; nevertheless I would record that I am grateful to them.

As to those with whom I have actually discussed all or parts of this book and from whom I received much help in the formulation of ideas, the following is a partial list. Foremost among them is Professor Bronislaw Malinowski, whose untimely death has deprived me of his critical comments. Others who gave much help with general concepts are Professor Frank Hankins of Smith College, Mrs. Edith Miller

Tufts of the Smith College School for Social Work, and Mr. Julius Teller of the New York State Commission for Law Revision. The staff of the Philadelphia Child Guidance Clinic aided me through their comments on the early chapters of the book, while Miss Harriett Bartlett and Mrs. Henrietta Gordon were especially helpful with regard to medical social work and child welfare, respectively. In addition, I am especially indebted to those who have allowed me to quote or paraphrase their case material. Their names appear in the footnotes that accompany the text.

Finally, I want to express thanks to Mr. Henry W. Thurston from whose book, *The Dependent Child,* I secured much documentary material about the early history of child welfare activities, and to the following organizations and journals that gave me permission to quote published material: American Association of Social Workers, American Association of Medical Social Workers, American Association of Visiting Teachers, Child Welfare League of America, *The Family, Journal of Social Work Process,* National Conference of Social Work, *Smith College Studies in Social Work, Social Work Today.*

H.L.W.

Smith College School for Social Work
November, 1942

CONTENTS

PREFACE Page vii

PART I: THE NATURE AND FUNCTION OF SOCIAL WORK

Chapter I Page 3

THE PROBLEM STATED

What is social work?—Why definitions are important.—A plan for formulating a definition of social work.—Suggestions for further study.

Chapter II Page 18

SOCIAL WORK AS A SOCIAL INSTITUTION: SOCIAL WORK ACTIVITIES

Categories of social work activities.—Social case work: the clients of social case workers; social case work services; how case work services are rendered.—Social group work: group work activities; which of these activities are unquestionably part of social work?—Community organization: activities of community organization; why some community organization activities may not belong to social work.—Public welfare administration.—Social action.—Conclusion.—Suggestions for further study.

Chapter III Page 47

SOCIAL WORK AS A SOCIAL INSTITUTION: PERSONNEL, CHARTER, AND MATERIAL APPARATUS

Personnel and organization of social work: personnel and their duties; extra-agency organization.—Does social work have a charter and norms of conduct?: legal aspects of social work; some of the values on which social work is based; technical rules in social work.—The material apparatus of social work.—Some consequences of having established the institutional nature of social work.—Suggestions for further study.

Chapter IV Page 67

THE NATURE OF SOCIAL DISABILITIES

Why social organization is necessary: basic biological needs and how they are met; instrumental requirements of a culture.—Forms and functions of social institutions.—The individual and the organized group.—The meaning of social maladjustment.—Suggestions for further study.

Chapter V Page 85

THE FUNCTION OF SOCIAL WORK

The family: substitutes for the family's services; relation of social work to these substitutes for the family; conditions handicapping the functioning of the family; social work's services with respect to ill-functioning family life.—Educational services and facilities: the distinction between social work and education; social work with groups; social work in schools.—Organized recreation: distinction between social work and the activities of recreational workers; social work services in recreational programs.—Suggestions for further study.

Chapter VI Page 110

THE FUNCTION OF SOCIAL WORK (Continued)

Medical institutions.—Neighborhood, nation, and state.—The general function of social work.—Suggestions for further study.

PART II: THE EVOLUTION AND PRESENT ORGANIZATION OF SOCIAL WORK

Chapter VII Page 127

THE ORIGIN OF SOCIAL WORK IN THE DILEMMA OF POOR RELIEF

The basic problem in poor relief.—Early methods of individual almsgiving and of mass relief.—A relief system aimed at repression and deterrence.—Relief as a means of supplementing inadequate wages.—A method designed to make the condition of the relief recipient unpleasant.—Relief measures for the "impotent poor."—Effects of these various measures.—The C.O.S. plan: the beginning of social work.—Philosophy and methods of the early C.O.S. case work.—Why the C.O.S. plan failed to solve the problems of poor relief.—Suggestions for further study.

Chapter VIII Page 156

THE DEVELOPMENT OF SOCIAL CASE WORK

Organization of private charity in the United States in the mid-1800's.—The original social philosophy of the charity organization societies.—Social workers discover economic determinism: the era of social reform.—Influence of the socioeconomic orientation on the development of case work.—Social workers discover psychology and psychiatry.—Influence of psychological orientation on family case work.—The present philosophy of social case work.—Suggestions for further study.

Chapter IX Page 183

THE ORGANIZATIONS THROUGH WHICH SOCIAL WORK IS CARRIED ON

Organizations primarily engaged in social work with clients: private agencies; public agencies.—Organizations offering social work among other services.—Organizations in which social work is auxiliary to the main activities.—Organizations giving service to other social agences.—Comments.—Suggestions for further study.

PART III: HOW THE SOCIAL WORK FUNCTION IS DISCHARGED

Chapter X Page 211

SOCIAL CASE WORK IN THE PUBLIC ASSISTANCE PROGRAM

American public poor relief before 1930.—Traditional attitude of social case workers toward public relief.—Changes in poor relief policies and practices during the 1930's.—The present public assistance system.—The place of social work in the public assistance program.—Principles of case work with clients of public assistance agencies: definition of area of service; case worker a representative of an agency; psychology of giving and receiving help.—Some illustrative cases.—Special problems in work with the aged, the blind, and dependent children.—Some consequences of differentiating between social work and poor relief.—Suggestions for further study.

Chapter XI Page 246

THE PRESENT PRACTICE OF FAMILY WELFARE WORK

Current conceptions about the purpose of family welfare work.—The kinds of problems with which family agencies deal.—Services and underlying principles of family case work.—Some illustrations of the work of family agencies.—Suggestions for further study.

Chapter XII Page 276

SOCIAL WORK IN THE FIELD OF CHILD WELFARE: HISTORY AND GENERAL PRINCIPLES

The scope of child welfare activities.—Economic facts necessitating child welfare programs.—The role of social work in child welfare activities.—The development of programs for providing for children's maintenance: outdoor relief and "farming out"; indenture; care in almshouses; child-caring institutions; free foster homes; boarding homes; relief to children in their own homes; the present system.—The beginnings of social work in child welfare as exemplified by the Boston Children's Aid Society.—Some differentials in the use of social work by child-caring agencies.—Suggestions for further study.

Chapter XIII Page 308

SOCIAL WORK IN THE FIELD OF CHILD WELFARE: ECONOMIC AND FAMILY ASPECTS

Social work in financial assistance programs: the need for case work in judging eligibility for aid to dependent children; arguments regarding the provision of other case work services; examples of situations in which case work may be needed.—Social work regarding the welfare of children in their own homes: types of agencies and programs; types of services.—Social work in connection with foster care facilities.—Day nurseries.—Child-caring institutions.—Foster homes: examples of typical situations in which foster-home care is sought; two schools of thought about child placement work; kinds of case work services afforded.—Suggestions for further study.

Chapter XIV Page 356

SOCIAL WORK IN THE FIELD OF CHILD WELFARE: SCHOOLS AND RECREATION

Case work in schools: objectives of various visiting teacher programs; current methods and illustrative cases.—Some current concepts about social group work.—Social work in the field of recreation: social case work; social group work.—Suggestions for further study.

Chapter XV Page 381

SOCIAL WORK IN THE FIELD OF CHILD WELFARE: COURTS AND CORRECTIONAL INSTITUTIONS

The nature of social work with delinquents.—Causes of delinquency: cultural aspects of delinquency; how children acquire a culture's standards; psychological aspects of delinquency; implications for treatment of delinquents.—Types of social work services.—Social work with delinquents and predelinquents under other than legal auspices: social case work; social group work.—Social work in juvenile courts: nature and function of juvenile courts; case work in connection with court activities; is the super-

vision of delinquents on probation social work?; methods of case work employed by probation officers.—Social work in correctional institutions.—Suggestions for further study.

Chapter XVI Page 423

SOCIAL WORK IN MEDICAL AND PSYCHIATRIC HOSPITALS AND CLINICS

Medical social work: origin and development; examples of current medical social work practice.—Psychiatric social work: social aspects of psychiatry; distinction between psychotherapy and psychiatric social work treatment.—Case work in mental hospitals: influence of various conceptions of psychiatry on case work practice; typical case work services in mental hospitals; an example of case work with a mental hospital patient.—Case work in mental hygiene clinics: types of mental hygiene clinics and their case work services; variations in the philosophy and practice of case work.—Suggestions for further study.

Chapter XVII Page 458

SOCIAL WORK IN CHILD GUIDANCE CLINICS

Child guidance clinics: origins and characteristic features.—Changes in conceptions about case work in child guidance clinics.—How the social work function is discharged.—An example of case work in a child guidance clinic.—Suggestions for further study.

Chapter XVIII Page 482

SUMMARY AND IMPLICATIONS FOR OTHER ASPECTS OF SOCIAL WORK

Distinction between social work and social welfare services.—Social work as a social institution: how the definition of social work was arrived at; the nature of social work as an institution.—Administration as a part of social work: what administrative activities belong to social work?; characteristics of social work administration.—Community organization as a part of social work.—Social action as a part of social work.—Social work as an institution and as a field of practice.—The future of social work: will social work always be needed?; social work and the war; general conclusion.—Suggestions for further study.

Appendix Page 519

SOCIAL WORK AS A CAREER

Preparation.—Salaries.—Professional organization.—Members of the American Association of Schools of Social Work.

Index Page 525

Part I

THE NATURE AND FUNCTION OF SOCIAL WORK

Chapter I

THE PROBLEM STATED

In the vocabulary of the average American citizen the words "social work" are rapidly attaining prominence. They are not new words, of course, but their connotation has always been elusive, being vaguely associated with charity, sentimentality, religion, doing good to your poor neighbors, and persuading people to behave in the way they should. Until recently all of this seemed so remote from most people's everyday life that few cared greatly to know more about the activities carried on under the name of social work. The poor might be interested in it, for they presumably were the recipients; but, even so, really self-respecting people would probably avoid contact with social workers unless they were visited by some extreme misfortune. The rich might contribute to the support of social agencies and even serve on boards to see that the funds they subscribed were well administered. But the vast middle class, by and large, would have little to do with it, beyond making some small contribution to the "community fund drive" and remembering that action comfortably when faced with the spectacle of some deserving person's need.

Within the past decade, it seems, all has been changed. Old people get "pensions" or "assistance," and political groups have been organized to see that they are given more money. During the depression period boys and girls were helped through school, sent to camps, advised about future careers, given temporary jobs, all through one or another branch of the government's "youth program." For the unemployed there is "compensation" of a sort, and financial aid is available to needy dependent children. Artists, writers, musicians, teachers, stenographers—whatever the individual's occupation or former financial status—there was, during the depression, a possible place[1] for a person of any occupational group in the "works" program. "Social

[1] Various temporary organizations were set up by the federal government in the 1930's to offset some of the effects of the long-continued depression. They are no longer in existence.

security" was often in the headlines, and poor relief became a national issue.

With all of these activities the general public rather vaguely associates the social worker. Her (and the pronoun "his" is becoming increasingly accurate) duties seem rather obscure, and many people are certain that the job requires little more than common sense and business acumen. But civil service commissions in many states say this is not true. However that may be, it is a fact that there are jobs by the thousands in this field called social work. Your neighbor's daughter who was going to be a secretary is dispensing what used to be called charity in the Red Cross Home Service office, and your cousin who meant to be a teacher is a child welfare worker, driving around the county in her car. As they come home to tell their tales it becomes more and more clear that there is something to this social work after all. The people the social workers serve are real people, not particularly different from the rest of us. And working with them—seeing that they get a square deal, helping them to their feet again—is not a particularly easy task, but one that requires knowledge and skill and understanding, and patience and exercise of judgment as well.

In the process of helping these people all manner of unsuspected or unnoticed activities and resources of the communities in which they live come to light, and it becomes increasingly apparent that social work is something that has been going on for quite a long time. Nor is it as limited to the poor as was once commonly believed. Some of the services that social agencies render seem just the sort that many of one's friends need. There are, it seems, agencies that find homes, temporary or permanent, for children whose parents are sick or distraught, disabled or dead; there are clinics that help parents with their children's behavior difficulties; there are agencies that give assistance with problems of family life, from household planning to marital difficulties; and so on. All in all, social work is apparently much more useful, much more interesting, and much more challenging to thought and endeavor than most people would ever have suspected. Consequently the social worker is attaining new status in the eyes of the public, and there is new interest in finding out what social work really means.

What Is Social Work?

All that being so, there comes the question: What is social work? How can it be defined? What makes a person a social worker? Is

looking into the needs of an applicant for relief social work? Is the person who distributes unemployment compensation a social worker? Is it social work that the club leaders in a settlement house engage in? If so, what about those who lead the Girl Scout troops? One could multiply examples, and the list would grow longer as one becomes better acquainted with the variety of activities and services that is offered by private and public agencies in large cities. And still the answers would not be quite satisfactory, for they would tend to be of the circular type, saying social work is whatever a social worker does, and a social worker is a person who works in a social agency.

It would probably be pointed out, in addition, that social work has something to do with poverty. The person who gives advice to mothers who come to a family welfare organization is usually considered a social worker; one who "counsels" with them individually after a meeting of the parent-teacher study group is not. The person who interviews applicants in a public employment office might be regarded as a social worker, but surely it is not social work in which a teachers' placement bureau engages! But are these satisfactory distinctions? Is the chief distinguishing characteristic of social work the fact that its clients are somewhat more in need of money than the majority of the population? If so, it is the clients' financial need and not the social workers' knowledge and skills that constitute the real basis of this new profession—and that regardless of what the clients come to the agencies for (financial assistance or not) and what kind of help the agencies offer! No, it is clear that this is not a satisfactory description of social work. Professions do consist of one-to-one correspondence between specific needs and specific skills. The medical profession serves the sick; the legal profession those in legal difficulties. But the specific need to which the social work profession caters must be something other than that of simple financial assistance, for the services of many recognized social agencies have little to do with poverty.

The question "What is social work?" is a knotty one. It is raised here only to show a few of its complexities and not to answer it immediately. In fact, the answering of that question is the primary purpose of this whole book. One clue to the answer, however, is suggested by the foregoing argument. There must be some unifying similarity running through the diverse situations that social agencies are set up to meet. Whatever is common to social work and distinguishes it from other professions must be sought in that area, for the knowledge and skills of any profession or trade or occupation are responses

to specific human needs. It is not sufficient, however, to look only at the characteristics of the clients. Under certain circumstances they may all be poverty-stricken, even as under other circumstances they may all have black hair. One must search for that aspect of their similarity to which the profession caters. Even though most pupils were feeble-minded, teaching as a profession could not be defined in terms of that characteristic alone; nor could the activities of the medical profession be adequately accounted for by reference to the prevalence of neuroses among its patients. The definition of any profession, the characteristics that set it apart from others and constitute its uniqueness are to be sought in the common ground where the needs of the clientele and the activities of the profession meet. On the one hand, one must look for the common elements in the diversity of specific problems that bring clients to social work agencies; on the other, one must search out from the profession's body of knowledge and skills those aspects that are its peculiar contribution to the solution of the clients' difficulties.

If the meaning of social work were clearly stated by members of the profession it would not be necessary to make the search for a definition the prime task of this book, which, as a textbook, would ordinarily be expected to deal only with well-accepted theories and facts. But a study of the literature on the subject shows that such is not the case. It is said in the *Encyclopaedia of the Social Sciences* (1934) that "no satisfactory definition of the term [social work] has yet been achieved," [2] and with this statement a writer in the *Social Work Yearbook* [3] for 1939 agrees. On the other hand, it is held that "the content and values of social work" are "sufficiently different from the 'charity,' 'philanthropy,' 'poor relief,' and 'social reform' which constituted its historical antecedents to make it a new and characteristically modern phenomenon." [4] In other words, the historians and practitioners of social work recognize social work as something that is different from other and somewhat allied activities, and yet they find it difficult to say exactly of what that difference consists.

Attempts at definition have, of course, been made. One authority calls it a "salvage and repair service," [5] and another "the art of helping

[2] Philip Klein, "Social Work," *Encyclopaedia of the Social Sciences,* The Macmillan Company, 1934, XIV, 165.

[3] Linton B. Swift, "Social Work as a Profession," *Social Work Yearbook,* 1939, Russell Sage Foundation, New York, pp. 430, 434.

[4] Philip Klein, *op. cit.,* p. 165.

[5] Edward T. Devine, *Social Work,* The Macmillan Company, New York, 1922, p. 1.

people out of trouble." [6] Many say that it has to do with improving people's social relationships, with developing their capacity to lead satisfying and useful lives.[7] But these statements are not sufficiently specific to distinguish social work from various other types of activities —education, religion, psychotherapy, for instance—to enable one to say this is social work and that is not.[8]

Why Definitions Are Important

Since so much difficulty is encountered in defining social work, one may well ask why we should try to formulate a definition at all. Would it not be better merely to list the activities that are carried on

[6] Karl deSchweinitz, *The Art of Helping People Out of Trouble,* Houghton Mifflin Company, Boston, 1924.

[7] Among other definitions of social work and its subdivision, social case work, are the following:

"The art of adjusting personal relationships, of helping to overcome difficulties which may arise, for example, between native and foreign-born, between employers and employees, between school and home."—Stuart Queen, *Social Work in the Light of History,* J. B. Lippincott Company, Philadelphia, 1922, p. 18.

"Social case work is concerned with some specific problem which the client is encountering in reality and with helping him to use whatever capacity he has to deal with it actively and responsibly."—Grace Marcus, "Social Case Work and Mental Health," *The Family,* XIX (1938), 103.

"Social case work is a process of counseling with the client on a problem which is essentially his own, involving some difficulty in his social relationships."—Bertha Capen Reynolds, "An Experiment in Short-Contact Interviewing," *Smith College Studies in Social Work,* III (1932), 9.

". . . those processes involved in giving service, financial assistance, or personal counsel to individuals by representatives of social agencies, according to policies established and with consideration of individual need."—Elizabeth McCord deSchweinitz, "Can We Define Social Case Work?" *Survey Midmonthly,* LXXV (1939), 39.

The most frequently cited definition of social case work is that given years ago by Mary E. Richmond: "Those processes which develop personality through adjustments consciously effected, individual by individual, between men and their social environment." As to the total field of social work, Miss Richmond had the following to say. "Case work seeks to effect better social relations by dealing with individuals one by one or within the intimate group of the family. But social work also achieves the same general end in other ways. It includes a wide variety of group activities . . . in which the individual, though still met face to face, becomes one of a number. By a method different from that employed in either case or group work, though with the same end in view, social reform seeks to improve conditions in the mass, chiefly through social propaganda and social legislation."—Mary E. Richmond, *What is Social Case Work?* Russell Sage Foundation, New York, 1922, pp. 223–24.

The subject of definition is most comprehensively covered by Alice Cheyney, *Nature and Scope of Social Work,* American Association of Social Workers, New York, 1926.

[8] Representatives of six national social work organizations came to this conclusion after an extended study of social case work. See *Social Case Work: Generic and Specific,* American Association of Social Workers, New York, 1929, p. 3.

in the name of social work and let it go at that? That is what some students of the field have done. Such a procedure, however, begs the basic question. To list the activities assumes that we know what social work is, for otherwise how would we know which activities to include in the list?

Definition, moreover, serves purposes in addition to that of providing a means of classification. Originally that was regarded as its chief function. The universe was conceived as being made up of fixed genera and species, and the purpose of research was to disclose Nature's arrangement. When this way of viewing the universe was discarded as unsatisfactory, there grew up the idea, still fairly prevalent, that words are purely arbitrary and that definitions consist of substituting for the unfamiliar word a series of others whose meaning is understood.[9]

Recent analysis of the function of definitions shows that they are much more important than either of the older conceptions would imply. On the one hand, it is now recognized that they play an essential role in the conduct of investigations, while, on the other, they greatly facilitate the understanding of phenomena after the investigation has been completed. That statement seems paradoxical, since it makes definitions both the means and the ends of inquiries (such as, for instance, the one we are proposing to make into the nature of social work), but its meaning will become clearer as we proceed.

As an example of the first use of definitions, take the question suggested at the outset of our discussion: Is the work of a public employment agency social work? The proposition that public employment agencies are engaged in social work obviously can be tested only by reference to an accepted definition of social work. The definition's first usefulness would lie in its giving the investigator a guide as to what kinds of data about employment offices are pertinent to the question at hand. It would act as a sorting device, showing which of the many aspects of public employment office work should be looked into and which could be disregarded in this particular study. The definition would indicate, for example, whether the economic status of the applicants for jobs sheds any light on the question of whether employment agencies are engaged in social work; whether the characteristics of the administrative authorities are important.

In addition to ruling certain types of data in or out of the inquiry

[9] This procedure is satisfactory only when the general subject matter is known, and the objective is to create a link between it and some other subject or object.

on the basis of their relevancy, the definition might suggest the inclusion of certain other types of data that might otherwise have been overlooked. This would be particularly true of aspects of the employment office activities that are not as obvious as those just mentioned. For instance, the definition might direct the attention of the student to the social values underlying employment office practices or to the role the employment office plays in the general economic scheme. In other words, a definition does more than merely aid in the classification of activities; it provides an instrument by means of which more penetrating analysis of them is made than would otherwise be the case.

As an example of the second use of definitions, suppose that on the basis of extended observation and reasoning it were concluded that a public employment agency is engaged in social work.[10] The definition of social work then serves a further purpose. It no longer directs an inquiry, for doubt as to the status of the employment office has been removed; rather, it serves as a symbol for a wide range of further information. If the employment agency's activities are social work, then all the things that are true about social work in general are true about them as well. If, for instance, it were established that there are certain kinds of training that all social workers need (and workers in other fields do not need), then if public employment agency workers are social workers, they too need that kind of training. If the aim of all social work were shown to be the amelioration of the economic condition of people in poverty, then the public employment agency's chief task would be to assign jobs on the basis of need.

This, then, is the dynamic element in definitions as conceived in modern logic: that they make research possible and direct the paths of inquiry. As such they are not static, do not have an unchangeable content, but instead they themselves become refined through use, so that the progress of inquiry is a continuous one, and truth is not established for all time but changes with the growth of knowledge. Definitions, then, are essential for understanding. We may get along fairly well without them as long as social conditions remain unchanged; that is, as long as life goes along in a manner fixed by custom, and nobody has doubts or raises questions as to why things are as they are. Under such conditions "common sense" is a sufficient

[10] Note that this is a purely hypothetical statement and is not intended to indicate that the work of an employment office really is social work. As a matter of act, analysis of the situation by the methods proposed here would probably lead to the conclusion that it is not.

guide. It tells us that certain facts always go together (social workers and destitution; poor relief and checking up on an applicant's need), but it does not tell why. Telling why is the essence of science, and definitions pay an indispensable role in scientific investigation.

A Plan for Formulating a Definition of Social Work

Since such practical consequences follow from the use of definitions, it is important to know how definitions themselves are derived. The answer has been partially suggested already, for if it were discovered that the characteristics of a public employment office justified its inclusion among social work activities, then we would be partly on the way toward making a definition of a public employment office. Instead of pursuing that example further, however, let us turn to a consideration of how a definition of social work could be arrived at. Since to make such a definition, and to follow out its implications, is one of the chief purposes of this book, this is equivalent to saying, "Let us indicate the plan and methods that underlie this study."

The most thorough and systematic analysis of what is involved in conducting an investigation is the one set forth in John Dewey's recent book, *Logic: The Theory of Inquiry*.[11] Much of the following analysis is derived from what Dewey says on that subject and is an attempt to adapt his rules to the problem at hand: that of finding out what social work is. The use of social work as an example of Dewey's method serves a double purpose. On the one hand, it will help to make the general analysis of the steps in any investigation clearer, while, on the other, it will provide an outline for the subsequent conduct of this particular inquiry into the nature of social work.

Dewey points out that investigations are instituted only when people are puzzled, and that most people are puzzled not because there is something wrong with their minds but because the situations with which they are faced are unclear. Such a statement calls attention to the fact that situations do not exist in the abstract, nor do human minds. Social work (as an example of a situation) consists of activities of people motivated and directed by certain pressures. Thoughts about social work refer to those activities, if they are something other than flights of phantasy. It follows, then, that the explanation of the confusion or lack of clarity as to what social work is must be sought in

[11] John Dewey, *Logic: The Theory of Inquiry*, Henry Holt and Company, New York, 1938. See particularly Chapter VI.

the situation itself, and not in the inability of people, in discussion or in writing books, to propound definitions.

1) An investigation starts with the recognition that a given situation is, as Dewey says, indeterminate. That is, it is indefinite, vague, not distinct or precise. This, it would seem, is exactly what the social work historians and theorists mean when they say that social work cannot be defined. At the same time, there is no doubt that social work constitutes a recognized field of activity. Many kinds of agencies and services are included within it. It has a body of theory and techniques that is recorded and transmitted from teacher to student in schools and training centers. It is officially recognized by governmental authorities. And yet not even its most capable theorists are able to draw a clear line and say with conviction exactly what it is that distinguishes social work from other activities.

It will be argued that there are always borderline activities; that definitions are never precise enough to demarcate the divisions of human endeavor. This may be true, but emphasis on such a point of view is at variance with the conception of the nature and function of definitions that is here being proposed. It probably represents a reaction against an outmoded but not yet wholly discarded way of looking at the world—the one that sees the world as being made up of a fixed, immutable order of kinds and species. Because modern science and philosophy disagree with that conception, many are inclined to stress the uniqueness of each individual event or activity and say that the search for uniformities is useless. Or, if they admit that classification is inevitable, they emphasize its unprecise character and consider it merely a convenient device for facilitating discussion.

Since this conception of definitions and classifications is fundamentally different from the one underlying the present discussion, the alternative point of view must be described again so that its implications for the proposed investigation are made more clear. Perhaps an illuminating way of putting it is to say that the aim of an inquiry is not to discover some *thing* that exists but to arrive at some *knowledge about* certain activities. In other words, we are not searching for social work as for an entity that is at present hidden by a cloud. We are searching for knowledge about social work that will shed light upon the nature of its activities and the reasons for them; that will serve as a base of reference when disputed issues arise; and that will link social work with other social activities by a system of related concepts

so that we are enabled to make what Dewey calls "warranted assertions" [12] about it.

Under such a conception of a definition of social work, the objection that there may be borderline activities loses its significance. If activities are discovered that are not adequately accounted for by the definition and yet are looked upon as somehow related to social work, the indication will be to make more precise the nature of the disagreement. The rigorous application of the definition may bring to light aspects of the new activity that had previously escaped notice, and in the course of this new inquiry the definition itself may be modified. Definitions, in short, involve many issues not apparent on first sight. Through the related bodies of knowledge that their application to new problems opens up, they serve a purpose far beyond that of mere classification.

2) Once it is recognized that a situation is problematic, the next step in an investigation is to locate the problem. This consists of finding out which parts of the situation are clear and well understood and which arouse debate and disagreement. Particular attention must be paid to the settled aspects, for any solution of the problem must include them in its scope or be unsatisfactory.

Without going into the matter in detail, we can best indicate a few of the unclear aspects of social work as follows. First, there is the question of what persons are to be considered social workers. In the 1930 census, which was the first to include the category, the following persons are classified as "social and welfare workers," but no attempt is made to distinguish one from the other.

Any charitable or welfare agency: agent, boys' or girls' worker, case consultant, case supervisor, case worker, cottage assistant, court worker, department supervisor or director, district supervisor, employment secretary, executive secretary, field worker, general secretary, health worker, home finder, house father, house mother, inspector, investigator, personnel supervisor or worker, placement secretary, registrar, research worker, social worker, supervisor, visitor, vocational advisor.

Any Catholic or Jewish charitable or welfare agency: case worker, executive secretary, social worker.

[12] Dewey uses this term in preference to belief or knowledge because belief so frequently refers to the mental state of the believer and not to objective subject matter, while knowledge is held by many to be arrived at by methods other than inquiry.—John Dewey, *op. cit.*, pp. 8–9.

Any children's institution: matron, superintendent.
Children's aid society: agent.
Any health agency: executive secretary, field worker, T.B. worker.
Hospital, clinic or dispensary: case worker, social worker, medical social worker.
Red Cross: secretary, agent, case worker, worker.
Any social settlement: headworker, settlement worker.
Boy Scouts or Girl Scouts: executive, director, scout master.
Boys' or girls club: secretary.
Community center: director.
Community chest: manager or official.
Any court: investigator, juvenile court referee.
Playground: director, supervisor, instructor, play leader, playground worker.
Recreation or summer camp: camp director or manager.
Travelers' Aid worker, visiting teacher, director Americanization work, community service worker, psychiatric social worker, recreation director or leader, welfare manager, welfare worker.[13]

Over thirty thousand such workers were reported. It has been questioned, however, whether playground workers, camp directors, and scout masters should be included among social and welfare workers and whether probation and truant officers, some county agents, certain workers in religious organizations, and the directors of day nurseries should be excluded from the list.[14]

Civil service descriptions of social work positions and requirements to be met by persons applying for them might be regarded as another source of information about what constitutes a social worker, but study of these documents reveals that there is little uniformity among them. Further inquiry shows that the national professional association of social workers has one set of standards for membership, and that trade unions of social workers have another. All in all, it is apparent that one of the unclear aspects of social work is that which has to do with the definition of personnel.

Lack of clarity about personnel implies lack of clarity about activities. As to lack of clarity in that area, there is no question. It manifests itself in two ways. In the first place, nobody seems to be entirely certain what general categories of activities should be called social work.

[13] Adapted by Ralph G. Hurlin from the Census Bureau's 1930 Index of Occupations. *The Number and Distribution of Social Workers in the United States,* Russell Sage Foundation, New York, 1933, p. 3.

[14] *Ibid.,* pp. 4–5.

Does it include all movements for the betterment of the social conditions under which people live? Or should the term be confined to certain charitable enterprises by which individuals are rescued one by one from oppressing social misfortune? Do the activities carried on in public playgrounds, in homes for the aged, in settlement houses and scout camps belong to the field of social work? And what about those which private individuals undertake when, for instance, they give food to tramps who come to the back door or homes to children whose parents have died?

In the second place, lack of clarity about the nature of social work activities is manifested by the disagreement as to whether the services of trained social workers are needed in social welfare programs. The bitterest point of dispute in the present system of public relief work, for instance, concerns what it is that social workers do which necessitates (in the opinion of their proponents) their having qualifications other than those of kindliness and common sense. Many administrators maintain that insurance salesmen and other such persons trained in business methods make the best investigators, while trained social workers insist that the job is a technical one which requires special preparation and abilities. To the first group the task of the social worker is simply to find out whether people applying for financial assistance really need and "deserve" it, and to keep track of their other possible sources of income once they are granted relief. To this description the second group would object that if such are the sole activities permitted and required, the work is perhaps not social work. They point out, however, that even in such a conception of duties there is need for the exercise of discrimination based upon an understanding of psychological and sociological factors, and that public funds are not used effectively and constructively for human betterment if they are administered in a purely mechanical manner.

This illustration suggests another area of lack of clarity about social work. What are its underlying purposes and values? Is the alleviation of destitution its chief aim? Or is reform the driving motivation? Many would maintain that the latter is the case. To them the social worker's chief task is to see that people do what society requires of them: support their families, care for their children adequately, carry out the doctor's orders if they are sick, live in decent houses and not in shacks on deserted lots or in disreputable boarding houses. In the accomplishment of this task the social worker is regarded as being distinguished from the policeman chiefly by the means used to produce

the conformity. The social worker provides money, jobs, recreation, advice, and so on, to the end that people are made into decent citizens; if these means do not produce the desired results, the policeman is the next resort. Professional social workers think of their work in very different terms. They disclaim reform and the use of authority and view theirs as one of the "helping" services. The distinction cannot be made clear without detailed discussion that must be postponed until later chapters; but it will be seen that the difference in underlying values in these two conceptions of social work would lead to very diverse consequences for the definition of the profession.

Beneath these unclear aspects of social work there is to be seen, however, a core of agreement. It is not distinctly demarcated, it is true; but everybody agrees that there are certain people that are social workers, certain activities that are social work, and even certain values without which no social work of any kind would be carried on. These are the "settled" aspects of social work. Just what they are will be examined in more detail later. Here our aim is only to indicate that social work can be broken down into component parts—its activities, its personnel, its underlying values and purposes—and that both the clear and unclear aspects of each of these parts lend themselves to investigation.

3) With a problematic situation resolved into its elements (that is, with the problem located) the next step in an investigation is to state the problem in terms of a suggested solution. Dewey distinguishes between "vague flashes" and "ideas" in this area, recognizing thereby that the proposed solutions will vary in their probable effectiveness. If the problem is very difficult or concerns a field in which there is little knowledge, we must follow out each vague clue in our search for the answer. The history of science is a record of such attempts. Men wondered what the stars were, and in their search for the answer made such varied suggestions as that they were gods, souls of the departed, the mystical regulators of human destiny, or windows of heaven. It was only after much study and speculation regarding this question and others seemingly remote that a body of scientific theory developed that could supply "ideas" that really furthered knowledge.

In searching for a tentative solution to the question of what social work is, we are not in the position of those watchers who first pondered over the nature of the stars. We know—somewhat vaguely, to be sure—the place of social work among other civic activities; we can

identify with certainty some of its personnel and their duties; we know that there are laws that refer to it and techniques about it that are taught in recognized training schools; we know that some of its activities are recorded in more or less standardized form. To one familiar with sociological theory this suggests that social work is a social institution. If this can be demonstrated, an important step toward the understanding of the nature of social work will have been taken. For, according to the theories of functional sociology, social institutions arise in response to fundamental human needs and are the means by which those needs are met. The presence of an institutionalized system of activities called social work would testify, therefore, to the presence of a specific need on the part of the people to whom the activities are directed. The problem then would become one of discovering the common characteristics of the needs to which the institution of social work caters and the function it performs in relation both to individuals and to other institutions of organized society.

In recent years cultural sociologists, under the leadership of Bronislaw Malinowski, have analyzed numerous kinds of social institutions and have arrived at a schematic way of looking at them that seems to have universal significance. By means of this analytic device it appears to be possible to find the place of any particular institution in the total social life and to arrive at an understanding of its function therein. The scheme is a classificatory one in the dynamic sense of the word. As has been said before, the aim of such a classification is not merely to group together certain individuals, activities, or events under a common title; that is, to give them a name. It is, rather, to tell in shorthand fashion something about them. If, therefore, it is found that the proposition that social work is an institution is a tenable one, all the body of knowledge about institutions is applicable to it, and we are led by that knowledge to inquire into otherwise disregarded aspects of the situation. Each of these, in turn, brings up new questions and sets new problems that require new suggestions for their solution. The end result of the process, providing the originally proposed solution is correct, is a better understanding of the whole problematic situation.

In the foregoing analysis of the method of investigations in general and of the plan of the present one in particular, we have perhaps proceeded too quickly for the reader's satisfaction. The evidence that has been presented in support of the proposition that social work is an institution is admittedly meager, and the proposed solution to the prob-

lem is perhaps too categorically stated. The aim, however, is merely to indicate in summary fashion the line of argument that the book will follow, and some of the reasons why that line was chosen.

The only aspect of the investigation so far determined upon is the hypothesis that social work is an institution. To test that hypothesis adequately and to follow out its implications will require the whole volume. Before that can be done, however, it must be made clear what a social institution is and to what activities the term "social work" can unquestionably be applied. With these questions answered, we can proceed with the testing of the hypothesis and the working out of its implications for a definition of social work that will include both its settled and its unsettled aspects. We shall examine social work with respect to personnel, services, and underlying systems of rules, techniques, and values to the end that the suggested definition be refined and clarified, and in the hope that certain disputed issues be at least provisionally resolved. It will not be expected, however, that this analysis will reveal a fixed and unchanging system. Instead, if it accomplishes its purpose, it should bring to light the underlying functions of the activities undertaken and an ever-changing body of values, rules, and organizations through which this function is accomplished in a changing world.

Suggestions for Further Study

Cheyney, Alice S., *Nature and Scope of Social Work,* American Association of Social Workers, 130 East 22d Street, New York, 1926.

A review of the definitions of social work that have been suggested and a brief analysis of the characteristics that set social work apart from other professions.

Dewey, John, *Logic: The Theory of Inquiry,* Henry Holt and Company, New York, 1938, Chap. VI.

Dewey's book is difficult for those who are not versed in philosophy and logic. For those, however, who want further information about the theoretical considerations that underlie the present investigation it may prove to be stimulating reading.

Chapter II

SOCIAL WORK AS A SOCIAL INSTITUTION: SOCIAL WORK ACTIVITIES

The proposal to look upon social work as a social institution facilitates the inquiry into the nature of social work only if the characteristics of institutions and their role in human society are well understood. Otherwise the proposition only substitutes a vaguer concept (institution) for the one (social work) whose lack of clarity initiated the investigation in the first place. It is necessary, therefore, to make clear what is meant by the term "social institution" if we are to find in it a key to the solution of the problematic aspects of social work.

The term "social institution" has been variously defined by sociologists, anthropologists, economists, lawyers, and others. There is a general agreement about the broadest aspects of its meaning, but few students have analyzed and developed the concept in such a way as to make it a useful instrument in the analysis of new data. Such a tool to further inquiry is provided, however, by Malinowski's [1] theory of institutions and his analysis of the social facts underlying them, and we shall accordingly use it throughout this investigation of the nature of social work.

There are two aspects to Malinowski's theory, both of which must be explained before its implications for social work can be explored. On the one hand, it has to do with the characteristics that his studies revealed as common to all institutions; on the other, it shows why institutions are needed, and what functions they perform. These two aspects of the theory are closely related, but in considering their bearing on social work we shall take first one and then the other, even though that method may leave certain questions temporarily unan-

[1] See Bronislaw Malinowski, "The Group and the Individual in Functional Analysis," *The American Journal of Sociology*, XLIV (1939), 938–64; "Culture," *Encyclopaedia of the Social Sciences*, IV, 621–45.

swered. The task of this and the following chapter, then, is to list the characteristics that Malinowski found to be essential to all institutions and to inquire whether social work has those characteristics. Then, when the institutional nature of social work is established, we shall consider why institutions are necessary and what is the place of social work among them.

According to Malinowski's analysis, a social institution is a system of concerted activities carried on by an organized, specifically designated group of people operating under a charter in accordance with definite rules or norms and by means of a material apparatus. The term "charter" is not restricted to a grant of power, rights, and privileges from a sovereign body but embraces also the doctrines and values that define the institution to its members and to the community at large. Through the charter the personnel of the group and their mutual relations are specified, their proper activities are set forth, and norms in accordance with which the activities should be carried on are established. The charter may be wholly traditional, or it may be partially or wholly written or codified. In any case it is the governing, norm-setting instrument, and it grows ever more complicated and detailed as the institution becomes more highly developed. As to the term "material apparatus," it refers to the concrete objects by means of which activities are carried on. According to this definition, then, institutions have four main elements: activities, personnel, a charter and norms, and a material apparatus, all of which are organized and systematized for the fulfilling of some social function. In the process of testing whether social work is a social institution the meaning of these component elements will be made clearer.

According to our plan of study, our first task is to find out whether social work does have the characteristics of a social institution as here defined. If it does, then the associated body of facts and generalizations about social institutions will be applicable to social work, and the further direction of our inquiry into its nature will be set thereby. We must first ask, then, what are the activities of which social work consists. If it can be shown that there are activities that are recognized as belonging to social work and are not those of other occupational groups or professions, either by reason of their special character or the occasion and manner of their undertaking, we must next inquire whether these activities are organized, systematized, and carried on in a concerted manner by a specially designated personnel. Then we must find out whether these people operate under a "charter"

and whether there are rules and norms that guide their activities. Finally we must ask whether they make use of a "material apparatus" in the conduct of their work, one that is specially designed to implement and facilitate their activities.

These questions, clearly, cannot be answered in detail at this point in the investigation. The present aim is to show that social work does have the characteristics of a social institution and, in the process, to indicate the broad lines of its structure and working methods. When this is made clear we shall seek to find out what purpose social work serves, what function it performs in relation to other social institutions in meeting human needs.

Categories of Social Work Activities

When we attempt to list the activities of which social work consists, our difficulties begin, for, while nobody doubts that social work activities exist, there is considerable question about whether certain activities belong to social work or to some other field. Our proposed means of temporary escape from that difficulty is to follow Dewey's suggestion and consider first the "settled aspects" of the situation; that is, to list first the activities that authorities agree belong to social work and to set aside for later consideration those about which there is dispute.

The vagueness of the term social work is manifested by the difficulty one finds in making such a list. Even the general categories proposed by various authorities do not meet with universal acceptance. Nevertheless these categories afford the best point from which to start our search, for describing them briefly and indicating some of the major subjects of dispute should bring to light some of the agreed-upon and some of the disputed elements in social work.

In 1922 Mary Richmond, one of the outstanding theorists in the field, classified social work activities as of four types: case work, group work, social reform, and social research.[2] Later writers added community organization or, as it is sometimes called, social welfare planning. In an authoritative article written about 1933, social case work, group work, preventive and educational work, and community organization were listed as the accepted technological categories.[3] At

[2] Mary E. Richmond, *What is Social Case Work?* Russell Sage Foundation, New York, 1922, p. 223.

[3] Philip Klein, *op. cit.*, p. 169.

about the same time the National Conference of Social Work was reorganized along the lines of its members' chief interests, and its five sections were entitled social case work, social group work, community organization, social action, and public welfare administration.

These lists indicate the profession's agreement that social case work and social group work are two basic categories of activity, and that community organization is also generally accepted as an essential aspect of social work. About research there is less agreement, probably because many regard it as a means of carrying on other activities rather than as an activity in its own right. The dispute over the inclusion or exclusion of social reform, social action, preventive and educational work, and public welfare administration involves numerous questions of theory and practice. Closer study of the literature reveals, moreover, that there is much debate about whether all forms of group work should be considered social work, and some authorities hold that community organization is not so much co-ordinate with social case work and social group work as auxiliary to them. It seems, therefore, that social case work is the one area of activity that all agree is social work, and accordingly our search for what social work is should start with it.

Social Case Work

Case work, like many other general concepts, can best be understood by observing what activities are carried on in its name. It should be noted in introduction, however, that the word "case" refers to the fact that the activities are those of person-to-person and person-by-person, in distinction from measures that are applicable to people en masse. The application of knowledge and skills on a case-by-case basis is, of course, not confined to social work, although the term "case work" is most frequently used in that connection. One might equally well talk about a physician doing case work when he attends his patients, or a minister when he carries out his pastoral duties, a lawyer in his work with clients, or even a teacher in his tutorial sessions. The adjective "social," however, distinguishes the activities of the social case worker from those of other professional persons. It is commonly said that social workers as a whole (not only social case workers) are concerned with social relationships, and, however vague a term that may be, we shall let it stand for the time being as the distinguishing mark of social case work activities.

The clients of social case workers

The categories of persons who are at present the customary clients of case workers are numerous, and there does not appear to be any single adjective that adequately characterizes them. It is commonly believed that all clients are poor; but although the majority of them undoubtedly are, some well-to-do people also use the services of social agencies. Outstanding examples of this are the clients of certain child guidance clinics and visiting teacher organizations. It is also usually thought that the clients of social case workers are chiefly ignorant people who are unable to do much for themselves in time of difficulty and so need somebody to guide and plan for them. Study of the records of social agencies shows the contrary situation in many cases. Again, one well-known social worker has characterized the clients as people who are "in trouble," but although this is undoubtedly true, there are many kinds of trouble that lie outside the compass of social agencies. We may, however, gain some idea of the kinds of trouble in behalf of which social case workers offer their services by listing the main groups of clients in terms of their presumptive handicaps.

Two facts are to be noted in this connection. In the first place, not all the people who have these handicaps become the clients of social case workers. The handicap merely makes them potential clients in the sense that the help of a case worker may be available to them by reason of it. In the second place, help with regard to the handicap or because of it is not always secured through the services of a case worker alone. In certain situations social case work is auxiliary to the main services offered. To the physically disabled, for instance, physicians supply the primary service, and with delinquents, judges and correctional authorities have the final authority. With these limitations, then, the list of the chief types of persons to whom social case workers offer help is as follows:

1) Persons with income insufficient for their needs
2) Children living under unsatisfactory home conditions
3) Families with domestic difficulties, such as those encountered in household management, housing arrangements, emotional relationships, child care
4) Unmarried mothers
5) Homeless or unattached persons, such as adolescents who have run away from home, orphans and deserted children, aged

without relatives who can care for them, migrant individuals or families, single men and women who have no place to live, and so on

6) Children who have difficulty in adjusting to school
7) Persons on probation or parole
8) Persons in the care of correctional, educational, custodial, or therapeutic institutions (prisoners, feeble-minded, insane) or under their supervision
9) Physically ill or disabled persons who need more than medical or nursing care or need help in arranging for these or other services
10) Patients of mental hygiene or child guidance clinics
11) Immigrants who need help with problems arising out of change of country
12) Persons suffering from the effects of natural disasters or war
13) Travelers who are stranded or in other unexpected difficulties

This list indicates clearly that case workers do not confine their efforts to the poor or the ignorant; but it is less obvious what the common element in these people's difficulties is that makes them suitable subjects for a case worker's help. To find this common element is one of the chief objectives of our survey of social work, but it can be noted provisionally that all of these potential clients are handicapped in one way or another in their economic or social relationships.

The economic aspect of the matter is the clearer, for some of the people in the list above could easily straighten out their difficulties if they had sufficient funds. Some domestic difficulties disappear when the family's income is increased. Some unmarried mothers need only money in order to find a way of caring for their children. Some homeless and unattached persons can make their own arrangements for living comfortably if their funds are adequate. And so on down the list.

But this is not the whole story. Most people who become the clients of case workers have difficulties beyond these purely financial ones. Domestic difficulties, for instance, are not confined to the poor. They often indicate some malfunctioning of the social processes through which individuals are normally trained to assume the responsibilities of family life. The difficulties of unmarried mothers also arise not only out of poverty but out of the fact that social customs have been violated and the normal avenues of providing for the care of the chil-

dren have been closed. With regard to patients of hospitals, institutions, and clinics, the social aspects of their difficulties are to be seen partly in their home and neighborhood and work situations, and it is toward these aspects that the attention of case workers is often directed. A closer analysis of the needs of these and the other potential clients listed above will be made later, but these examples may suffice for the moment to substantiate the tentative conclusion that case work concerns people who have difficulties arising out of the economic or social aspects of their lives.

Social case work services

The activities that case workers carry on with their clients and the services they render them cannot be adequately categorized here, but the following is a list of those that are most commonly recognized.

1. First, the giving of *financial or other material assistance*. This was the activity around which social case work first developed. Banks, loan and insurance companies, churches, and friends also perform this service for people in economic distress, but when case workers give money they are usually dealing with individuals whose needs cannot be met through these other sources.[4]

It is not necessary to place much emphasis upon this service, however (except in a later connection when we can describe it in its larger setting), for social work and the relief of poverty are almost synonymous in the public mind. Equally well known and frequently also overstressed in popular accounts is the case worker's service of *information and advice* about numerous aspects of social life and relationships. Although case work agencies are seldom set up primarily as information services, examination of their records will show that the requests of many clients are speedily answered by telling them where and how their needs can be met. Under this heading can be listed giving information about the recreational, educational, legal, medical, child care, and general public welfare facilities available to the clients and appropriate to their needs.

Information is also frequently given without referring clients to other community resources, for clients may want to know about matters

[4] This point is raised here chiefly to indicate that the activities listed are not peculiar to social case work, and that a closer analysis of the conditions under which the services are offered and the ways they are given is necessary to reveal the characteristics that mark them as belonging to that profession. For the time being, however, we shall not enter into these distinctions but note here only that the giving of relief is among the important services that social case workers render.

that lie immediately within the agency's sphere of interest. To describe the services of the agency by which they are employed and to consider with the client whether he wants to use them under the stated conditions is an activity in which case workers engage at one time or another with almost every client. Then, too, case workers frequently give information on a host of subjects not so clearly related to their own profession: medical care, child care and training, housing, insurance adjustment, mental disease and feeble-mindedness, probation and parole, eligibility for relief or pensions, household management—to pick at random from what would be a very lengthy and sometimes humorous list if it were compiled.

Advice frequently accompanies information, in case work as in more casual human relationships. It must be emphasized, however, that modern case workers, in distinction from an earlier variety, use advice, as well as information, sparingly and with professional awareness of its suitability to the person and the situation. It is one of the tenets of modern case work that the client must be helped to make his own decisions, and a corollary of this proposition is that advice must not be weighted with too much personal influence on the part of the case worker. The giving of advice, therefore, is confined as far as possible to matters of no great emotional import to the client; and in many situations in which a friend, for instance, would urge particular modes of action, a case worker would merely survey with the client the various possibilities and try to help him to decide which he prefers to follow.

Case work of this latter type is sometimes designated *counseling*. In the opinion of many, this kind of activity is the most important and the most distinctive aspect of case work; there is no question that it receives the greatest amount of attention in case work literature. The problem of how to conduct interviews with clients in such a way as to preserve and foster their self-respect and their strength to deal with difficulties is one of the prime concerns of case workers. Modern case work theory has drawn heavily upon dynamic psychology for explanations of human motivations and behavior and for techniques of helping people to see their way clear to making decisions. The counseling type of activity is used by case workers in so many kinds of situations that to make a list of them would be impossible, but in later chapters numerous examples of this kind of work will be found.

In addition to these activities, case workers perform various services on behalf of clients as well as directly with them. Among these

are a wide array of services concerned with *securing shelter and care.* There are many homeless or unattached persons (single men and women, adolescents who have left home, aged persons without responsible relatives, migratory families, people who are victims of floods, fires, and other disasters, and others) who need this kind of assistance. Then there are children whose parents cannot or do not want to keep them at home or who are considered grossly incapable of rearing them. Day nurseries, foster homes, institutions caring for children, the handicapped, and the aged are among the facilities often available in such cases. Social workers spend much time in making arrangements (or helping their clients to make arrangements) for this kind of substitute home life, in supervising the children who are placed in foster homes, and in maintaining contact with the parents or relatives. Somewhat similar are the activities undertaken on behalf of unmarried mothers, for they, too, often require help with living arrangements and child care.

Some of these activities may be grouped with others under the general heading of *effecting environmental changes.* Under this term can be included the many things that case workers do in order to improve the conditions under which their clients live. One might, of course, include in this group the giving of material assistance, but we are referring here to the numerous ways in which case workers more directly attempt to alter or mold (or help their clients to alter or mold) the environment in which the clients live.

Case workers connected with mental hospitals, for instance, often have the task of explaining a patient's actions and needs to the persons with whom he is to live and of attempting to understand these people in order to help them to accept the patient's peculiarities and so make life more tolerable for them. Some of the activities of case workers in schools, courts, and child guidance clinics are of much the same nature, in that they often have to do with effecting improvement in the attitudes of those who are in charge of the children. Medical social workers have among their chief duties those of removing hindrances to patients' recovery from illness, hindrances that may lie in the environment and be of a psychological as well as of a material nature. Then there are numerous practical services that case workers may perform for their clients: arranging for insurance adjustments, securing camp, club, or other recreational facilities, providing visiting housekeepers, securing care in hospitals or convalescent homes, and so on. These are but a few examples of activities that can be included in the environ-

mental-change group. The trend in case work practice is away from "doing things for people"; nevertheless much of the time of most case workers is still spent (and probably necessarily so) in working for clients as well as with them.

A final category of activities in which case workers engage (and it must be emphasized that this classification does not include all that they do) is that of *securing information for other professional persons.* Case workers are employed by hospitals, clinics, schools, courts, and correctional and custodial institutions to work with other members of the professional staff in the interests of the clients. One of their jobs in such positions is to collect data about clients so that those who are treating or otherwise working with them shall understand the social, economic, and psychological conditions under which they live.

Juvenile court judges, teachers, and administrators of institutions, for instance, usually have to know something about the parents and the home conditions of the children under their care before they can understand the aspects of the children's behavior that deviate from the average. Physicians in mental hospitals often find such information helpful in explaining why their patients became ill, and they need it also in planning for their patients' care after they leave the hospital. Physicians in medical clinics and hospitals can sometimes better understand a patient's difficulty in following directions and advice when they know his financial situation, his customary diet and ways of living, his own and his family's attitudes toward diseases and their knowledge about them, and the general emotional relationships that prevail in the home.

Then, too, all these professional workers often need help in keeping informed about how the individuals under their charge progress. Teachers, of course, see their pupils daily, but they may want to know whether changes they institute in their ways of handling difficult children are reflected in better behavior outside school. Physicians, judges, and others who serve people in a medical- or social-treatment capacity find it more necessary to learn about the results of their planning, for needed alterations in it are often indicated by facts that can be secured only through visits to the homes and interviews with interested persons. Those at the head of institutions (medical, psychiatric, correctional, custodial) often allow their charges to leave on condition of continued good health or good behavior. In such circumstances it is the task of the case worker not only to report on progress but to secure information about conditions that may influence it.

How case work services are rendered

Few case workers engage solely in gathering information or in carrying on any one of the activities that have been listed above, for in work on any particular case several or all of these kinds of service are usually involved. This is one of the distinctive features of social case work as contrasted with mass measures for the relief of social and economic distress: that a variety of means of help is made available to clients even though there may be a general similarity in their problems. Just how this works in practice will be shown more clearly in later chapters when the activities of various types of social agencies are described, but the point must be elaborated upon here also, for it may prove to be one of the important clues in our search for the distinguishing characteristics of social work as a whole.

The basic tenet of social case work is that no client is wholly like another in his needs, and that the knowledge and skills of the profession must consequently be applied in a somewhat different manner in each case. This assumption is not peculiar to social case workers but is shared by doctors, lawyers, teachers, psychological therapists—by all who try to help individuals with their difficulties. The law says that such and such acts are forbidden and such and such are the penalties, but the lawyer considers the circumstances and the motives and prosecutes or defends in the light of the total story. Medical science says that such and such a combination of symptoms indicates a given disease and such and such treatment should be prescribed, but the skilled physician takes account of his patient's general physical condition and the social and psychological circumstances and adapts his methods accordingly. Somewhat similarly, a social agency may be set up for child placement, but the case workers on the staff do not determine eligibility in a mechanical manner or assign children to homes on the basis of standardized criteria. Instead, they consider carefully with the applicants the occasioning circumstances, the children's needs, and the resources of the available homes, and they maintain careful watch over the children and their foster parents, using all their technical skills in the service of the individual children's requirements.

The peculiarity of this case work method of dealing with the social and economic problems of individuals becomes more apparent when it is contrasted with mass measures directed to the same ends. These latter are posited on the assumption that some needs can be stated and met in class terms. In the economic field, for instance, such devices as

workmen's compensation and old-age and unemployment insurance are set up in such a way that when certain conditions arise these remedies become almost automatically operative. The chief work of those who distribute the benefits is to determine whether applicants are eligible for the grants and whether they continue to be so. Once this is settled, there is little choice about further measures. These devices are set up to fill recognized gaps in the economic system. Regardless of how they are multiplied, however, there still remain some individuals whose economic requirements are not met and who must be considered on a case-by-case basis because of the individual nature of their difficulties.

Somewhat similarly, certain educational programs, such as parent education, are offered partly to make up for deficiencies in the general educational system. Nevertheless, no matter how assiduously parents study, nor how many radio programs, newspaper columns, moving pictures are produced in their behalf, there are still many who need the help of a counselor in working out the social problems involved in child rearing and guidance.

These examples indicates that case work comes into play when an individual's social or economic difficulties cannot be adequately described in class terms (when they are peculiarly his own by reason of the unique combination of factors in himself or in his environment) and cannot be adequately met by measures directed to him as one of a group having similar needs. They also suggest that the social and economic problems of individuals are often met by other than social case work means; that, in fact, their remedy is sometimes contained within the system (such as the economic or the educational) in which they originally arose. These are possible leads to the nature of social work, the first two (or the second at least) referring only to that limited part which is social case work and the third to the field in general. Their importance will become clearer as our analysis proceeds.

Social Group Work

The activities that are carried on under the name of group work are more diversified than those of social case work, and it is much less clear that they form a unified whole. From a professional point of view the field is not nearly so highly developed as social case work; there has been less theorizing about objectives and methods, and less emphasis upon the formal training of workers. In recent years, how-

ever, this situation has been changing rapidly, and the questions of what group work is and should be have aroused much controversy. One of the points of dispute is whether group work is a part of social work or whether it is more closely allied to education and recreation. A glance at its activities, listed below, shows that there is much merit in this question; but, since our quest is for an understanding of what social work itself, is, it is not one on which we can as yet advance a definite opinion.

Grace Coyle, an authority on group work, defines it as "a type of educational activity carried on in voluntary groups during leisure time and with the assistance of a group leader. It aims at the growth and development of individuals through group experience, and at the use of the group by its members for social purposes which they consider desirable." [5] She contrasts it with formal education, where the acquisition of knowledge and skills is the prime consideration, and with large-scale activities in which the contact between individuals is superficial and the leader knows little about the group members. Such a definition would seem to include much of progressive education and recreation in its scope, and claims have been made that public health and health education, industrial relations, vocational guidance, adult education, child study, social legislation, and "character building" activities also belong in the group work field.

Definitions aside, however, there is considerable agreement that the term "group work" is applicable to most of the activities carried on by settlement houses, community centers, the numerous boys' and girls' work organizations, such as the Y's, the Scouts, and 4-H Clubs, and to certain educational, recreational, and "group therapy" activities carried on in institutions or by case work agencies. Such an approach to the question attempts to avoid disputes by defining group work in terms of the auspices under which the activities are carried on. Although this is far from satisfactory, it may serve temporarily to provide us with that agreed-upon body of data with which any inquiry into the problematical must start.

Group work activities

A survey of the group work of these organizations reveals the following, somewhat overlapping classification of activities, which is set up without reference to the particular kinds of organizations engaging in them.

1. *Recreational or leisure-time activities, especially those designed for children and youth.*—These include physical and social activities, many of which are carried on through clubs. Sometimes the club is primary, and through it the members engage in numerous activities. Boy Scout troops, for instance, have athletics, camping, nature study, woodcraft, and the like, among their interests, and each troop builds up its own program. Settlement houses often offer hospitality and guidance to clubs formed on the outside, and these groups usually have more than one area of leisure-time interest. Again the club may be organized around a particular program, and members be attracted to it on the basis of their interest in that activity. On the other hand, recreational programs may be offered on other than a club basis. These leisure-time activities are not necessarily confined to young people, for settlement houses have, for example, "mothers' clubs," and community centers have clubs organized along age, sex, nationality, and occupational lines.

2. *Pedagogical activities.*—These overlap to some extent with the previous category because many of them are also carried on through clubs. Since more or less formal instruction is given by specially trained teachers, it seems justifiable, however, to put these activities in a group of their own. Among the usual subject matters covered are English language and literature, arts and crafts, child care, social and economic problems, mental hygiene, and vocational guidance. The instructional methods favored by up-to-date group work organizations are those of progressive education, so that our terms "pedagogy" and "instruction" might be considered by some to be inappropriate. We are using the terms, however, in the broad sense and are referring to objectives and not to methods.

3. *Activities aimed at cultural preservation and assimilation.*—One of the original purposes for which many settlement houses and other organizations were set up was that of helping immigrants to achieve a balance between their old ways of life and those of the new world. To this end "Americanization" classes were offered, and at the same time attempts were made to preserve the arts and crafts and social values of the immigrant groups. With the great decrease in immigration that followed the passage of the quota laws in 1922 and 1924, these activities gradually came to occupy a smaller place in the organizations' programs, but they have not yet wholly died out, although much of the formal instruction has been taken over by night classes in the public schools. In recent years the European "refugees" have

created a new class of people with somewhat similar needs, so that it may be that this aspect of group work will flourish again.

4. *Activities aimed at strengthening community life.*—This is one of the most important of group work activities, both historically and currently, though there was a period during which interest in it apparently declined. Among the original purposes of the settlement-house movement was that of providing civic and educational leadership in the poverty-stricken areas of large cities that had been deprived of those elements that make for cohesive community relationships. Various methods were employed to that end—from attempting to develop local leaders through club activities, to providing health, education, and recreation services that a self-sufficient community would provide for itself. Some of these latter activities declined as public authorities took them over, but others increased in number and variety of services.

Of the methods used to foster the sense of civic responsibility, the most recent is that of discussion groups, which have as their aim the development of their members' ability to take part in democratic processes. Social, civic, and economic problems are usually discussed, but the leader's objective is not so much to impart knowledge (though this is not discounted) as to develop the group members' ability to form opinions and act upon them in conjunction with others. It is hoped that by these means some of the values of the town-meeting type of democracy will be preserved and that ways will be found for citizens to make their desires effective through modern political devices as well. This aspect of group work is not confined, however, to people who are socially incapacitated; instead, its proponents view it as a general educational method to be used with groups of widely varying character whenever the objective is the furthering of democratic participation in community affairs.

5. *Therapeutic activities.*—Considerably different from any of the preceding group work activities are those directed to the treatment of social difficulties that are peculiar to individuals rather than characteristic of groups, such as immigrants or residents of socially disorganized neighborhoods. Special workshops, clubs, and camps have been organized for children who do not react normally to the competitive situations of usual group life. "Play groups," with equipment and games especially selected for helping children to work through their difficulties of personality or social relationships, are a recent innovation

in child guidance clinics and in other types of social agencies and institutions.

Work of this type is still in a very rudimentary state of development. Part of the theory underlying the work is that people (children as well as adults) who find social relationships difficult can sometimes understand and help each other when they are brought together in groups, and that their mutual give-and-take plays as important a part in the cure as does the guidance of the group leader. In addition, it is believed that such individuals can be helped by carefully supervised and controlled activities in which the leader is sensitive to individuals' reactions and can either adapt the situation to their needs or can use it in a helpful manner. These kinds of group work are usually carried on in connection with other, more individualized treatment, but they are sometimes used alone, particularly when an individual's need is seen to be primarily for help in forming satisfactory group relationships.

Which of these activities are unquestionably part of social work?

In the preceding section, we came to the conclusion that social work, at least in so far as social case work is concerned, is directed toward people who are in difficulties with respect to the social or economic aspects of their lives. Applying this criterion to the activities of group work, we find that some of them would qualify as social work and others would not. Leisure-time programs, for instance, are not conducted only for individuals who are in economic or social difficulties. Certain organizations, such as settlement houses, draw their clientele largely from the lower income levels, but others, such as Y's and Scouts, appeal to all economic classes. Nor are the programs based on the assumption that the participants are maladjusted or socially inadequate. Some of them, it is true, are aimed at the prevention of delinquency, as, for example, those that attempt to bring the "cellar clubs" of slum areas under guidance and control. But, by and large, group workers' efforts in leisure-time activities are not limited to problem children; in fact, such children are often excluded from clubs and other group activities.

Much the same is to be said for most of what might be called "pedagogical activities," including in that term most discussion groups and other varieties of informal education. In contrast, the other types of activities in the above list are concerned with people who have one

or another kind of difficulty of a social nature. This is perfectly clear with respect to the category last described, but activities directed toward cultural preservation and assimilation and those directed toward strengthening community relationships center around people who, in one way or another, are out of the main stream of American life. The maladjustment of these people, however, is not so much personal as characteristic of their neighborhood or community group. In the Greek quarter of a large city, for instance, the older generation may continue the customs of the old country, but the question of reconciling old and new ways of living is apt to arise in all families as the children grow up. In such a situation of common difficulty it would seem that help can best be afforded on a group basis, for the assistance which these people can give each other in a discussion group under skilled direction is probably greater than that which could be secured through case-by-case methods. Somewhat similar are the groups of people—usually economically handicapped—who seldom exercise the rights of citizenship and who do not know how to put their desires into effect through the use of the facilities which the democratic organization of political power provides. Again, this is a group rather than a personal problem, in so far as it is characteristic of an area rather than of scattered and disinterested individuals, and group methods seem again to be especially pertinent.

If this argument is correct, it would appear that these two latter kinds of group work share with case work its concern for individuals who are handicapped in one or another of the social aspects of their lives. They differ from case work in the fact that the needs that are to be served are common to the individuals concerned and can be met by methods that depend on group rather than on individual relationships. Between group work and case work in these respects stands what we have called group therapy, where the individual client's needs which bring him to the social agency are peculiarly his own, but where the method of help employed involves the use of group techniques.[6]

In contrast, the purely recreational and pedagogical uses of group work methods seem to have little in common with social case work. On the basis of the criteria so far set up, one would be inclined to say that these kinds of group work are not social work, but a more certain answer to that question must await further analysis.

[6] For illustration of this see Case 13, Chapter XI.

Community Organization

The third large category of activities that by common agreement are considered part of social work is that which for twenty years or so has been called community organization. Much dissatisfaction with this term is expressed, and it has been suggested that social welfare planning should be substituted for it. A listing of the activities that are carried on in the name of community organization leaves one, however, with the conviction that that, too, is an inadequate term, but it does not suggest a better one—a fact that may have implications as to the present vagueness of the field. It may be pointed out in introduction, however, that the term "community organization" does not mean the same thing to social workers as to sociologists. To the latter it refers to a description and analysis of how communities are organized, politically, socially, economically; to the former it originally denoted the activities involved in organizing communities for the supplying of social welfare services, but it now has a wider connotation. The following are the broad categories of activities that are now carried on under the heading of community organization. Such a listing shows clearly why the term is inadequate as a descriptive title.

Activities of community organization

1. *Social work planning.*—Social work organizations and social welfare programs, like all other organized efforts, have always required planning, both for their initiation and for their continued conduct, but it is only in rather recent years that such planning has become an activity of specialists who devote their full time to it. Not that all planning for social work and social welfare has been delegated to such specialists, but it was the fact that such workers and their organizations came into existence that particularly occasioned the setting aside of community organization as a special field of social work.

Planning for the provision of social work services involves, on the one hand, the continuous securing of data with regard to the changing needs of the population for the kinds of assistance that social work affords and, on the other, the constant appraisal of the efficiency and value of the work of the organizations through which the services are rendered. Such planning is carried on both by individual organizations and by bodies representing either the organizations (such as the welfare councils of large cities), or the general public (such as public welfare commissions and special legislative committees). Policy-making

activities might also be regarded as planning, but they are more frequently classified as an administrative function.

2. *Activities directed toward the provision and maintenance of the facilities through which social work services are rendered.*—Planning in and of itself is obviously not sufficient; steps must be taken to insure that social work organizations are supplied with funds with which to pay their staffs, maintain their physical property, and, frequently, provide money or other material assistance to their clients. Few social work organizations charge fees for their services, and the few that do seldom receive sufficient funds from that source to be self-maintaining.

Activities in this sphere are not confined to fund raising through private subscription, for much of social work is financed through taxation, and some is paid for by foundations and by religious, fraternal, and other organizations. Nor does the inclusion of activities concerned with arousing public opinion and influencing legislation complete the list. Behind the securing of financial support lie the perhaps even more important activities concerned with winning the interest and approval of people who are to provide the money. For the continuance of financial support, the utilization of the agencies' services, and the demands made upon the agencies all derive from the public's understanding of and interest in the kind of services the agencies are set up to render. Communities and legislatures and private philanthropists may sometimes be cajoled or browbeaten or stampeded into financing programs to which they are opposed or for which they see little need, but programs established by such means are likely soon to founder—to be condemned as useless "frills" or dangerous experiments—if they are not solidly grounded in the desire and interest of responsible and influential citizens.

This situation is not confined to agencies supported by private subscriptions, nor is it even limited to situations in which local financial support must be secured. A recent writer on the subject has pointed out some of the problems involved.

> Such a situation may occur when a state welfare agency is seeking to develop support in a county for a program of child welfare services. In this case the general outlines of the program are set: federal funds will be available to provide services to the county's children under certain definite conditions—the most important being the county's willingness to accept qualified personnel and to supplement the program by the payment of expenses incurred on behalf of the children served. The local community

will accept these conditions, provided, first, that it feels the need of help in meeting its responsibilities to dependent children, and, second, that it is convinced that qualified social workers can offer that help more effectively than the politically sponsored aspirants for the job. . . . In a county where such services have been customarily rendered through a combination of politically appointed personnel and private agencies operating largely on a voluntary basis, there may be little disposition to see the need for change. . . . The worker's task then becomes one of studying the county rather than the dependent children, and this requires the ability to evaluate the forces that mould public opinion and determine official action. . . .

By placing responsibility for decisions affecting social work programs where it belongs—with the community—social workers escape the onus attached to "social reform," and social work frees itself from the necessity of proving its worth by claiming miraculous results . . . . We must convince the community that the best professional social work skill is as necessary to the public welfare as that of other better recognized professional groups by patiently establishing a relationship of mutual helpfulness around those problems with which the community is actually concerned . . . . The County Commissioners who have experienced such a relationship with a secretary of Child Welfare Services will not want to throw him out of the window and bring in the politically sponsored applicant for the job. And the Advisory Committee which has shared with that worker the development of the program and the pride of achievement in its results will support professional services in the face of political upheavals that might jeopardize their survival.[7]

Such a conception of the nature of the activities that need to be undertaken by social agencies to insure their establishment and continued use and support indicates also that interpretation of social work programs cannot be wholly delegated to organizations set up for that special purpose, such as "community chests," or even left to the publicity departments of the agencies themselves. Much of it is part and parcel of the daily work of an agency's regular staff, is carried on through contact with clients as well as with persons representing the general public (for clients who are satisfied with an agency's services are its most effective advertising medium), and as such can be separated from the rest of case or group work only for analytical purposes.

3. *Securing co-operation among agencies and co-ordination of their services.*—This is another sphere of community organization activities

[7] Mary Clarke Burnett, "The Role of the Social Worker in Agency–Community Relationships," *Proceedings of the National Conference of Social Work*, 1941, pp. 677–78.

that has a long history and that involves both work within agencies and work carried on in their behalf. As a later chapter will show in detail, social work originated in an attempt of the London Charity Organization Society to co-ordinate the activities of numerous public and private relief-giving organizations. That aspect of the Society's endeavors was not very successful at the time, some of the reason probably lying in its disregard of the public's opinions and desires. Nevertheless, this society, and others modeled after it, did originate or foreshadow various devices for co-ordinating the work of social agencies that are in use today. Among them are community chests and councils (organizations through which welfare and health agencies carry on fund raising, research, and other activities that are to their mutual benefit), co-ordinating councils (through which representatives of social agencies and other community organizations pool their resources for the benefit of clients), social service exchanges (by means of which record is kept of the agencies to which individual clients have been known), and other devices of a co-ordinating character.

Co-ordination of the work of social agencies and their co-operation in carrying on social work services are also secured through the efforts of staff members, both in formal committee meetings and through joint work on individual cases. Here again there is need for that knowledge of other people's customs and values and for that respect for their right to proceed in accordance with them on which so much of the effectiveness of work with individual clients depends.[8]

Why some community organization activities may not belong to social work

So far it seems clear that the activities commonly listed under the heading of community organization are part and parcel of social work, for they are intimately bound up with work with or for individual clients, are partly carried on by the same persons who engage in case work and group work activities, and can sometimes only artificially be separated from those activities. There are, however, other aspects of community organization that, although they may be needed in

[8] In emphasizing this aspect of social work we are anticipating some of what is to be said below in connection with social work's "charter." It is of importance here, however, in indicating that there is a common element in the philosophy under which case work, group work, and community organization activities are carried on. The presence of such a common element does not in itself demonstrate that all of these activities belong to the same social institution, but it is one evidence of their unitedness.

order that social work shall survive, appear to be co-ordinate with social work rather than a part of it. One of these is seen in that part of planning that embraces all of social welfare rather than being confined to social work agencies. It has been pointed out by one writer on the subject that "inextricably involved in such planning are the programs of public works, housing, social insurance, agricultural relief, resettlement, flood control, public health administration, labor laws, public relief, the problem of unemployment, of employable and unemployable dependents, child welfare; principles and methods of taxation, administrative relations within the federal government, between federal and state governments, and between both these and local governments." [9] To call the planning involved in all these spheres a part of social work, and all the people who engage in these activities social workers, would deprive the terms of their specific meaning.

Again, community organization is often taken to include all organized efforts, especially those of agencies set up for the purpose, to provide and improve social welfare resources. The work of experts in fund raising, in publicity, and in carrying on "educational" campaigns is included under the heading of community organization when its aim is to promote measures designed to initiate, maintain, or improve facilities through which the health and welfare of, usually, the economically deprived elements in the population are secured.

Obviously, one of the sources of the lack of clarity in the distinction between these activities and those that are definitely a part of social work lies in the equating of the terms social work and social welfare. Both terms are admittedly vague. An attempt at a detailed analysis of their difference would take us too far afield at this point, but it may temporarily be noted that social work is only one of the means through which the social welfare of individuals is advanced. Social welfare is basically secured through the institutional organization of society. Social welfare activities are directed toward the improvement of that institutional organization; social work activities toward assisting individuals in their use of it. The facts and theories on which this conclusion is based will be presented in later chapters,[10] but the conclusion itself may help at this point to show why we are inclined to consider some community organization activities a part of social work and some not a part of it.

[9] Philip Klein, "Social Welfare Planning," *Social Work Yearbook* (1939), p. 426.
[10] See, particularly, Chapters IV, V, and VI.

Public Welfare Administration

Much the same conclusion will probably be reached after a survey of the activities usually included under the head of public welfare administration. Administration in itself is clearly a necessary part of any work that is carried on by organized groups, and enough has already been said about social work to suggest that much of it is so conducted. The administrative aspects of social work have to do with the organization and management of social agencies, public and private, including in those terms general administrative relationships among units of the same organization, personnel problems, questions of finance, and so on. In so far as these agencies differ from other kinds of organizations in their purpose, structure, and activities, they undoubtedly create special administrative problems that require the development of special policies and techniques. In this sense administration is a field of social work. Much the same can be said for research. Both administration and research, however, would appear to be auxiliary to the main purpose of social work rather than partaking of its essential nature.

Our analysis so far, however, does not warrant the conclusion that social work embraces all public welfare activities, and it is that which is the point at issue when we question whether public welfare administration is a part of social work. According to the *Social Work Yearbook*, 1939, the term "public welfare" is used by social workers to include "all governmental activities for the prevention and treatment of dependency, neglect, delinquency, crime, and physical or mental handicap. It includes programs for various types of public assistance, such as general relief, unemployment relief—whether direct or work relief—disaster relief, and assistance to special groups such as the aged, dependent children, and the blind. Also included are special services to various groups such as under-privileged children, the physically and mentally handicapped, and the delinquent, and the administration of institutions for these groups. Related to these institutional programs are probation, parole, and clinical services." [11]

It will be noted that most of the groups of people cared for by public welfare services have been included in our list of potential clients of social case and group workers. To claim, however, that all the governmental services rendered for the "prevention and treat-

[11] Fred K. Hoehler and Marietta Stevenson, "Public Welfare," *Social Work Yearbook* (1939), p. 348.

ment" of their handicaps are social work is another matter, for these include public health activities, education and care of the feeble-minded, treatment of the insane, punishment and reformation of criminals, and so on. Such a claim would be equivalent to saying that all work in behalf of people in social or economic difficulties is social work, and we have already pointed out one or two reasons why we do not think this is the case.

Social Action

The final group of activities considered by some to be a major field of social work (we shall omit, for the time being, social research) has come in recent years to be called social action. The term "social action" refers to organized and legally permitted activities designed to "mobilize public opinion, legislation, and public administration" [12] in favor of objectives believed to be socially desirable. When the term is so defined, it is clear that many groups other than those composed of social workers engage in social action. Political parties, labor unions, peace societies, organizations of parents, teachers, doctors, lawyers, and the like, may have this as one of their main objectives. That such activities are a part of the work of other organized groups would not, however, preclude their being a part of social work also. The question is rather whether social action is social work or whether it is one of the categories of activities in which social workers engage in some other organized capacity.

The distinction is between social work as one institution and professional associations of social workers and individual social agencies as other institutions, for it is clear that not everything a social worker or a social agency does is *ipso facto* social work. This distinction holds true in other professions as well. To take one aspect of social action as an example, it needs little argument to prove that lobbying by teachers is not education, nor by doctors a part of medical practice, nor is it one of the peculiar activities of parents in carrying out the functions of the family. Lobbying is, however, one of the recognized activities of business associations, of trade-unions, of peace societies, and, similarly, it is one of the accepted activities of many professional organizations.

[12] These are the words used by the committee that drafted the 1934 constitution of the National Conference of Social Work. By that constitution, the Conference was divided into four sections, one of them being called social action.—John Fitch, "Social Action," *Social Work Yearbook* (1939), pp. 398–401.

Professional organizations carry on political activities for two purposes, both uniformly admitted to be legitimate: (1) to increase the facilities and effectiveness of their own work; that is, to secure for themselves more and better equipment, increased power or authority, enlarged and even monopolized scopes of activity, and the like; and (2) to secure enactment of general laws which the profession's special knowledge shows to be in the public interest. In addition, such organizations frequently try to obtain special privileges that may not benefit the public. Social workers, through their professional organizations, also engage in political activities, as, for that matter, do plumbers and members of other trade-unions. In short, in a democratic society most occupational groups organize and seek through social action both to enhance their status and to promote what they conceive to be the public good. Professions, because of their tradition of public service, pay particular attention to the latter aspect of the matter.

It is to be noted, also, that in distinction from political parties and from organizations formed to further general or specific social objectives, organized occupational groups usually confine their social action to questions that involve their expert knowledge and experience and seldom direct their attention to general social reform or broad social reconstruction. Activity of this latter type, however, has been urged by some proponents of social action among social workers, its justification being held to lie in the very nature of social work itself. It has been said, for instance, that "social action as a social work activity arises logically out of the basic assumption of social work; that is, out of the concern for the well-being of the individual which is the motivating element in all social work and especially in case work practice . . . When in recognition of circumstances, the social worker invokes the more powerful forces of community or state in order to make possible the same objectives which he was formerly seeking through individual action alone, he is still engaged in social work."[13] In other words, social action is here conceived not as an activity distinct from social work, as it is distinct from medical practice or education, but as an inherent part of it, one of the means through which its function is carried out.

In favor of this point of view is cited the long tradition among social workers that part of their task lies in the field of social legislation and social reform. The New York State Charities Aid Association, for instance, worked for years to get through the legislature bills

[13] John Fitch, *op. cit.*, p. 400.

that would permit the establishment of mental hygiene clinics in rural areas. Hull House, the famous settlement in Chicago, has engaged in many activities aimed at bettering the conditions under which the residents of its neighborhood live and at promoting social welfare in general. The charity organization societies, in which case work largely originated, went through a period in which they considered social reform more important than work with individual clients.[14] Against including social action as a part of social work is put the argument that its actual pursuit requires knowledge and skills that are not at all peculiar to social work, that are, in fact, the special province of other professional and technical experts, such as political scientists, economists, and practical politicians.

It seems to us, however, that the argument cannot be decided on the basis of either historical precedent or professional knowledge and skill. It turns, rather, on the question of what the real function of social work is, what part social work plays in the institutional scheme of which it is a part. Since the answer to that question can be given only after a detailed analysis of the social organization of society and the place of social work in it, it seems necessary to postpone conclusions about social action until that is made clear.

Conclusion

Our search for the activities that are indubitably social work leads, then, to the conclusion that they are to be found chiefly in the field of social case work and in some aspects of group work as well, and that they also include those organizational, administrative, and research activities that are a necessary part of social case work and social group work. These activities which appear undoubtedly to be social work have a common element in their concern for individuals who suffer from social or economic disabilities, but the exact nature of those disabilities has not yet been adequately analyzed. It is clear, however, that social work is not the only means through which people with such disabilities are helped, nor is it yet certain that social work is limited to such people. In other words, our analysis of social work is still in the preliminary state, and all that has been accomplished so far is the listing of some of the agreed-upon aspects of its activities. The main question under consideration at present, it will be remem-

[14] See Chapter VIII. Also Edward T. Devine, *When Social Work Was Young*, The Macmillan Company, New York, 1939, pp. 54f.

bered, is whether social work is a social institution. With these known activities as a base from which to start we shall now proceed to apply Malinowski's other criteria.

Suggestions for Further Study

General

Malinowski, Bronislaw, "Man's Culture and Man's Behavior," *Sigma Xi Quarterly,* XXX (January 1942), 73–5.
"Culture," *Encyclopedia of the Social Sciences,* Vol. III, pp. 621–45.

Social Work Yearbooks, Russell Sage Foundation, New York.
Articles on numerous aspects of social work. See, for example, Social case work, Social group work, etc.

For conceptions of social institutions other than that proposed by Malinowski, see J. O. Hertzler, *Social Institutions,* McGraw-Hill Book Company, New York, 1929; F. Stuart Chapin, *Contemporary American Institutions,* Harper & Brothers, New York, 1935.

Social case work

Milford Conference, *Social Case Work: Generic and Specific,* American Association of Social Workers, 1929.
An attempt by a group of representative case workers to set forth the generic elements of their profession: field, objectives, vocational resources and methods.

Richmond, Mary, *What Is Social Case Work?* Russell Sage Foundation, New York, 1922.
Examples of what case workers do and how they do it and on what basic principles they proceed. In spite of the length of time that has elapsed since this book was written and the changes in case work theory and method that have taken place, this book is still considered the most authoritative statement of the profession's philosophy and policy.

deSchweinitz, Karl, *The Art of Helping People Out of Trouble,* Houghton Mifflin Company, Boston, 1942.
A classic in the field. Illustrates by many homely examples what is meant by social case work and how it is carried on. Most of the practices described are still considered professionally sound.

Sheffield, Ada Eliot, *Social Insight in Case Situations,* D. Appleton-Century Company, New York, 1937.

An analysis of the typical activities of social case workers in terms of the needs that call them forth. Not all of the case work methods here described and illustrated would be approved by the profession today, but Chapter I, in particular, may help the beginning student to see concretely what kinds of problems are typically presented to case workers and how they are dealt with by them.

Social group work

Coyle, Grace, *Social Process in Organized Groups,* Farrar & Rinehart, Inc., New York, 1930.

Studies in Group Behavior, Harper & Brothers, New York, 1937.

These books, by one of the leading authorities on group work, show some of the changes in concepts and practice that have taken place in recent years, as well as illustrating the various problems with which group workers deal and the various ways they carry on their activities. Much of the work therein described would not be social group work according to the criteria proposed in this book. (See Chapter XIV.)

The Group

Monthly bulletin of the Association for the Study of Group Work. See this for current discussion of group work theory.

Lieberman, Joshua, *New Trends in Group Work,* Association Press, New York, 1938.

A collection of articles written by leading authorities in group work. Useful in showing the kinds of problems group workers are dealing with and discussing. This is a publication of the Association for the Study of Group Work.

Slavson, S. R., "The Group in Development and in Therapy," *Proceedings of National Conference of Social Work* (1938), pp. 339–49.

Discusses the twofold aspect of group work: as a means of developing personality and as a means of therapy. Does not, however, draw the obvious conclusion that this marks a distinction between group work in education, recreation, and social work.

Community organization

Klein, Philip, and Collaborators, *A Social Study of Pittsburgh,* Columbia University Press, New York, 1938, pp. 398–484.

Analysis of the planning and co-ordination of social work in Pittsburgh. Although very detailed and written for the particular purpose of evaluating a community's social welfare program, this book serves to show the student how varied are the agencies and how complicated the structure of social welfare organization in a large city.

Lane, Robert P., "What Is Community Organization?" *Social Service Review,* XIII (1938), 703–7.

An interesting article that sums up points of differences and agreement among various students and practitioners of community organization and lists its chief methods.

Witmer, Helen Leland, *Psychiatric Clinics for Children,* Commonwealth Fund, New York, 1940, Chap. II.

A brief sociological analysis of some of the reasons why a social work program has to have community support.

Social action

Devine, Edward T., and Lillian Brandt, *American Social Work in the Twentieth Century,* Frontier Press, New York, 1921, pp. 19f.

Fitch, John, "Social Action," *Social Work Yearbook* (1939), p. 400; (1941), p. 506.

Richmond, Mary, *The Long View,* Russell Sage Foundation, New York, 1930, pp. 588f.

Miss Richmond was for years considered the leading theorist in the field of case work. Her point of view about social action—or social reform, as it was called in her day—was that social workers can supply the needed facts on which social welfare legislation should be based and can also help in the solution of difficulties that arise in applying laws to individual cases. In the pages here referred to, Miss Richmond gives an example of what she means by this.

Van Kleeck, Mary, "Case Work and Social Reform," *The Annals of the American Academy of Political and Social Science,* LXXVII (1918), 9f.

Public welfare administration

Abbott, Edith, *Social Welfare and Professional Education,* University of Chicago Press, Chicago, 1931, Chap. IV.

Describes the activities embraced under the concept "public welfare administration," and why social workers should participate in them.

Smith, Lucille Martin, "Service Aspects of Public Assistance Administration Facilitating Rehabilitation of Persons in Need," *Social Security Bulletin,* V (February, 1942), 10f.

Shows in what ways organization and administration are necessary to meet the needs of individuals and families who apply for public assistance.

See also the reading lists for Chapters IX and XVIII and articles on administration in the *Social Work Yearbooks.*

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Chapter III

SOCIAL WORK AS A SOCIAL INSTITUTION: PERSONNEL, CHARTER, AND MATERIAL APPARATUS

That social work consists of collective activities that are sufficiently well established to be recognized as belonging together and forming a system there was never much doubt. Our problem in demonstrating that social work meets this first criterion of a social institution lay not so much in proving that there is a system of social work activities as in drawing a line between activities that indubitably belong to social work and those that perhaps should be regarded as belonging to some other social institution. It was necessary to establish this agreed-upon body of activities as a base from which to start, for otherwise our inquiry into the nature of social work would remain vague and indeterminate. Having found, however, that there are activities that unquestionably belong to social work, we can apply the other criteria of a social institution to them, secure in the knowledge of what activities we are talking about.

The other criteria that a system of concerted activities must meet to qualify as a social institution in the sense in which we are using the term are the following: it must (1) have an organized, specifically designated personnel who (2) operate under a "charter" in accordance with established rules and norms and (3) wield a "material apparatus." The task of this chapter is to show that social work meets these criteria.

Personnel and the Organization of Social Work

The union of efforts and the specialization of efforts that the term "organization" implies are seen most immediately in the means through which social work services are made available to the individuals who desire them. In distinction from law and medicine, there is very little "private practice" in social work. Instead, social work activities are carried on either through social agencies or through de-

partments of other organizations, such as hospitals, schools, and courts. The work of these agencies is usually specialized, each organization serving a certain group of clients or giving assistance with certain types of problems. There are, for instance, separate agencies for securing foster care for children, for giving assistance with problems of family welfare, for aiding travelers, for providing financial assistance to various categories of needy persons, for protecting children against neglect and abuse; within schools, hospitals, and child-caring and correctional institutions social work is limited to the individuals who are in the charge of those organizations. In small cities and in rural communities various types of social work services may be made available through a single agency, but in large cities the specialization of services is great.

Personnel and their duties

That the personnel of social agencies is comprised of people specially designated to carry out certain tasks is a fact that would seem to require little confirmation. The chief administrator of a state-financed relief service, for instance, is usually designated by the governor as the person to perform duties set forth in the law. Subordinate workers may be chosen by civil service examination or may be appointed or selected by other means, but in any case they are designated to do certain specified jobs. In a social agency that is supported by other than public funds the board of directors is usually chosen by the original contributors, members, or sponsors, and later chooses its own additional members. The executive is selected by the board, presumably on the basis of professional competence, charged by it with certain general duties, and expected to give concrete expression to the aims of those who finance the agency. Similarly, the rest of the staff are specifically chosen to do certain work.

In large family welfare agencies, for instance, there are likely to be district superintendents, who have both administrative and supervisory duties; a case consultant, who gives advice about the treatment of unusually difficult cases and conducts some training courses for other staff members; supervisors, whose work is to assign clients to the case workers who will have personal contact with them, to keep informed of what is being done with or about them, and to help in the training of new workers; intake workers, who have the initial interviews with applicants and decide whether their requests and desires fit in with the agency's conception of its job; case workers, who

carry on the direct work with and for the clients. In addition there is frequently a dietitian or home economist to give advice about diet and budgets; and there is almost necessarily a statistician, with or without assistants, to handle the quantitative aspects of the work, a bookkeeping staff, numerous clerical workers headed by an office manager, and one or more maintenance workers to keep the offices clean and in order.

Other kinds of agencies have other distinctive types of staff members. Child placement agencies, for instance, distinguish between those who find suitable foster homes and those who supervise the children placed in them. Public relief agencies have a carefully defined hierarchy of workers, ranging from junior investigators to administrative officials. Group work agencies, too, have a wide variety of workers—those skilled in arts and crafts, physical education, vocational guidance, club leaders, and so on.

As social work has become more highly organized, specifications have been set up that limit the persons who may be or are apt to be chosen for these positions. These regulations apply particularly to those in subordinate positions but may include executives as well. Civil service boards frequently insist that applicants for positions shall have had certain educational preparation for the work, and many private agencies have similar requirements. Job advancement is frequently dependent upon the securing of technical training. Most workers in specialized activities, such as research, statistics, dietetics, vocational guidance, and the like, have previous preparation for their jobs, and the proportion of case workers trained in schools of social work increases each year. Thus to the general observation that the group of people working in social agencies are specially designated to do that work (and just what part of the work they shall do is usually also stated) is added the fact that frequently only certain people are eligible for selection.

The duties, responsibilities, and rights of these various workers within a social agency are clearly defined, testifying further to the organized character of the work. The tasks the individual social workers are called upon to perform, the methods they are to use, and the policies to be followed are not decided upon by each one separately but are the result of joint planning or executive decision. In their contacts with individual clients social workers have to exercise judgment and make many decisions and plans, but even then they do not act in a completely self-responsible capacity. What they do is to give indi-

vidual and concrete expression to rules and policies formulated for the guidance of the whole group of similar workers. In a public agency some of these regulations are set forth by law and others are determined by the local administrator; some are nation-wide and some are limited to the particular locality. The degree of permitted flexibility and personal judgment is probably greater in private agencies,[1] but, regardless of an agency's auspices, no staff member works as an independent person. Even the executive of a private agency is limited by the board of directors, who themselves are responsible to the people who contribute the money for the kind of service the social agency is set up to give.

This fact of organization for the carrying on of work is one of the marks that distinguishes social work from the numerous forms of somewhat similar activity in which individuals engage as private persons. In such a capacity people often give money to those in need. They often provide homes for children whose parents cannot support them. They arrange for the care of aged and sick persons, give assistance to travelers, advice to immigrants. In short, they give help to all the kinds of persons in all the kinds of situations with which social workers deal. And yet they are not called social workers and what they do is not regarded as social work. One of the reasons for this is the lack of organized, co-ordinated effort, though there are additional reasons that will become evident as we proceed.

Extra-agency organization

Organization of social work for the carrying on of activities with individual clients extends beyond the individual agency. It is seen in the numerous devices by means of which social workers of different agencies co-operate in serving clients. In large cities, for instance, a separate organization, called a social service exchange, maintains a file of names of the clients of all member agencies. This enables social workers to avoid duplication of efforts, to exchange information about clients, and to make plans for their joint care. Extra-agency organization is also indicated by the fact that applicants and clients are referred from one agency to another, according to their desires and needs. Co-operative work is further strengthened in some cities by "co-ordinating councils" through which agencies pool their resources for their

[1] The term "private agencies" is used in social work parlance to refer to those organizations that derive their financial support wholly or largely from other than public funds.

clients' benefit. These and other devices testify to the fact that even in work on individual cases the organization of social work extends beyond the agency's confines.

Evidence of extra-agency organization of other aspects of social work is found in the union of agencies for purposes of money raising, for the planning and co-ordination of services, and for research; and additional personnel, again specifically chosen to perform certain designated tasks, are thereby added to the roster of social work. "Community chests," councils of social agencies, and the like come under these categories. Then there are state and national associations of particular types of organizations, their purpose being to give advice and guidance and keep the staffs of member agencies informed about each others' problems and policies. The Family Welfare Association of America is an example of this type, as is the National Girls' Work Council. In addition there are "national committees" and research and publicity organizations that perform much the same function. Then there are state, regional, and national "conferences" of social work that cut across agency lines and provide a forum for the discussion of general as well as specific social work problems. Over three hundred organizations of these and other types are listed in the 1939 edition of the *Social Work Yearbook*.

Further evidence of the organization of social work and the differentiation of social work personnel is found in the presence of schools of social work and other training and study programs. In the schools the philosophy, theory, and techniques of the work are taught to future practitioners, demonstrating again that social work is not merely anything that a given individual chooses to make it but that each practitioner has to be inducted into the modes of work by formal or informal instruction. Nor are the faculties of the schools free to teach whatever they judge to be the necessary theories, facts, and techniques for the practice of social work. There is an association of schools that sets standards which schools must meet in order to be accredited. These deal, among other matters, with the qualifications of the instructors, the content of the curriculum, and the amount of time students must spend in supervised practice. In drawing up these specifications the committees of the association seek the advice of individuals actually engaged in social work and of representatives of various organizations of social workers. Control over schools both in and outside the association is secured partly by prestige and partly by the refusal of the American Association of Social Workers to accept graduates of non-

accredited schools as full members. In this way an interlocking of professional training and professional practice is secured.[2]

Final evidence of organization is found in the presence of a social work literature. There are textbooks and books about general and specific problems of social work theory and practice. There are professional journals and pamphlets and "newsletters" that report the findings of research workers, discuss questions of policy and method, describe typical and atypical cases met in practice, and, in general, serve to foster and enhance the professional character of social work. Then, too, individual agencies and associations of agencies issue annual and other reports. As a means of retaining the interest of their financial supporters and of informing them and others about their work, many agencies issue pamphlets written in a popular style or secure newspaper publicity. All this is a part of that conjunction of efforts for the carrying out of activities that distinguishes organized social work from the efforts of private individuals that may be directed toward the same ends.

Does Social Work Have a Charter and Norms of Conduct?

This brief survey of evidence is probably adequate to demonstrate that social work activities are carried on by specially designated individuals who are highly organized for the performance of their tasks. We have next to inquire whether social work is carried on under a charter and in accordance with norms; that is, whether there is a body of values and technical and legal doctrines that defines its organization, designates its personnel, establishes rules and norms for its conduct, and specifies its activities.

That such rules and such an instrument governing social work exist is implied in much that has already been said. It has been shown that there is a well-recognized way in which both public and private services are set up and that there are standards by which personnel are chosen. The general outline of the hierarchy of power and privileges and duties that starts with the board or commission and extends down to the lowest grade of social worker and to the secretarial and maintenance staffs—themselves ranged in order of rights and duties—is not determined anew with each generation or invented for each sepa-

[2] Not all social workers, by any means, learn how to do their work by going to school, but the demand for trained workers (that is, those who are graduates of accredited schools) is rapidly increasing. In this respect social work training is in the position of legal training thirty or more years ago.

rate organization. There are books that tell how to organize a staff and services and how to conduct the business of a social agency. Although authorities on social welfare administration are not in complete agreement with each other, there is sufficient similarity in their plans so that the latter would never be confused with, say, plans for the organization of an army or of a private business.

Legal aspects of social work

Then there are legal aspects to social work that have to do with many matters, such as the incorporation, regulation, and financing of private agencies, the provision and administration of public ones, and the governmental framework within which they operate. For instance, some state governments have constitutional provisions that prohibit the appropriating, granting, or donating of money in aid of any except certain restricted categories of individuals, such as the destitute, the orphaned, the blind, and the aged. There are also constitutional limitations to state and local borrowing for such purposes.

In many states both public and private agencies are subject to inspection, licensing, and regulation by state boards, though there is much variation in the degree of such control. In 1930 eighteen states, for instance, exercised some supervision over all private charitable corporations, and twenty-two others had some control over all such corporations dealing with children.[3] States also exercised legal control over some of the fund-raising activities of social agencies. Legal action may be instituted because of fraudulent appeals for money, and municipalities may require that permits for solicitation be secured.

In publicly financed social work the control exercised by governmental authorities is immediate, and numerous laws regulate the conduct of such agencies and set the conditions of eligibility of persons for its services. Private agencies are frequently brought into somewhat the same relationship with the legislature through subsidies, for governmental bodies often find it more expedient to provide for the care of certain classes of dependents through existing private sources than by setting up new agencies. For instance, in 1929 over $7,000,000 was appropriated by twenty-four state legislatures to private charitable organizations, which included such agencies as industrial and training

[3] Arlien Johnson, *Public Policy and Private Charities,* University of Chicago Press, Chicago, 1931, p. 8. See this for a detailed account of how the state, particularly Illinois, subsidizes and regulates private social agencies.

schools, maternity homes, child placement agencies, travelers' aid societies, and institutions for the deaf, dumb, and blind.[4]

Social work's legal basis is further attested to by the numerous kinds of statutes that define its powers, limit the kinds of assistance which can be offered, and regulate the conditions of its clients. The following list of categories of laws frequently consulted by social workers shows the wide character of the legal rules that govern or impinge upon social work: "adoption, aid to dependent children, blind, board of child welfare, boarding homes, child labor, children (deserted, neglected, delinquent and crippled), deaf and dumb, disorderly persons, divorce and annulment, education, guardianship, housing, illegitimacy, incorporation of charitable institutions and agencies, inheritance, insanity, labor, loans, marriage, mental defect, old age assistance, probation, public health, public relief, settlement, state departments of welfare and of mental hygiene, corrections, and education, support of children and relatives, unemployment insurance, veterans' relief, wayward minors, workmen's compensation." [5] Many others could be added to the list, of course, but these serve to call attention to the scope of the legal aspects of social work's charter.

Some of the values on which social work is based

That social work has a charter in the sense in which Malinowski uses the word is further shown by the fact that there is a set of values on which the profession agrees and which is closely related to its system of knowledge. "Knowledge," says Whitehead, "is always accompanied with accessories of emotion and purpose" [6]—an observation that is particularly true of the professions. The fundamental social value on which social work is based—which, in fact, caused it to come into being—is the age-old idea, as Whitehead expresses it, of the "essential rights of human beings arising from their sheer humanity." [7] That this humanitarian ideal is not the guiding one of our whole civilization is indicated by the presence of others that contradict it. Among them are to be noted the ideal of competition, with the associated beliefs that the masses of mankind cannot rise to a high state of well-being and that advance is secured through the destruction of the unfit; the doctrine that no love of mankind as such is possible but only an interest

[4] *Ibid.*, pp. 4, 43.

[5] *New York Directory of Social Agencies* (1940), pp. 454–55.

[6] Alfred North Whitehead, *Adventures of Ideas*, The Macmillan Company, New York, 1935, p. 5.

[7] *Ibid.*, pp. 15–29.

in individuals in certain relationships to oneself; [8] and what has been called the pessimistic aspects of Christianity: its contempt of the "carnal aspects" of human nature, distrust of reason, and belief that the search for earthly happiness is futile.[9] These and other ideals and beliefs compete in present-day society, and social workers share many of them; but in the belief in the worth of each individual just because he is a human being social work as a profession stands united.

In the early days of social work there was added to that belief the often associated one concerning the duty of the wealthy and the educated to give the poor and the socially maladjusted (the two were often regarded as almost synonymous terms) the benefit not only of their money but of their counsel and friendship so that they might be lifted out of their unfortunate state. Modern social work, however, has discarded this sense of moral superiority and adds to its belief in human worth its belief in "human dignity," which is taken to mean the right of each person to determine the conduct of his own life.

Within the broad compass of these two values are many more explicit statements that guide policy and practice. Many of them deal with the financial aspects of social work, for in spite of the fact that social work cannot be adequately defined in terms of poverty, lack of money on the part of clients occasions the majority of its services. As examples, the following rules of social work may be cited: that financial relief, when given, shall be adequate to its purpose; that the conditions for the receipt of relief shall not be degrading to the recipient; that the giving of money or other forms of assistance, material or not, shall not put the giver into a position of authority over the recipient; that families shall not be broken up because of lack of money alone.

Values are also implied in the general aim of social work. This was originally described as social rehabilitation; later, when it was thought that these words connoted moral regeneration, the goal was said to be the development of personality, the raising of each client's life to its highest possible level. In recent years both of these purposes have been rather discredited, and the value aspects of the generalized objective have become somewhat obscure.

Technical rules in social work

A distinguishing characteristic of modern social work, in contrast to older systems of charity and philanthropy, is that it has a body of

[8] *Ibid.*, pp. 35–45.

[9] James Westfall Thompson, *An Economic and Social History of the Middle Ages*, D. Appleton-Century Company, New York, 1928, pp. 61–62.

scientific rules based on observation and research and on the findings of other disciplines. The following quotation from an article by one of the leaders in case work gives evidence of this, as well as showing that social work proceeds on the basis of ethical values.

> The final choice of a course of action, expressed as behavior, is a resultant of many forces—out of the person's past, as well as his environment in the present, and out of his world of ideals and his hopes for the future. A case worker who understands that this is true of everyone—not least of himself—knows that he cannot be the controlling force in the decision about what to do with some problem in the life of another.
>
> The case worker must discard, then, any sense of god-like superiority to these other influences, and must study them with the most accurate observation and the finest sensitivity to what the client is saying. Only by this carefully controlled process may the case worker discover what place he actually has among the forces that determine the client's feeling and action. It is the client, who has all his life been gathering up into a knot these strands of influence, from within and from without himself, who is the only one in any position to use the case worker (who is just one more influence) in balance with the rest.
>
> If we accept the foregoing as true . . . the futility of coercion becomes increasingly evident. It is no longer a question of whether it is wrong to try to make our fellow beings think and feel as we want them to. In the long run it is simply silly.[10]

The technical rules of social work have to do with organization, administration, the use of social resources outside the agency, and, most important, the actual conduct of work with individual clients. This last is a much more complicated body of methods and techniques than is usually appreciated by outsiders. It is based chiefly upon a rapidly growing body of knowledge about what is involved psychologically in the process of giving and receiving help. It is no longer deemed sufficient that the social worker be a person of good will and ability to make friends and influence people. The capacity to use human relationships in a way that is helpful to others is held to be a highly professional skill that can usually be acquired only through the careful training of those who are especially gifted in this respect. The professionalization of social work has developed largely out of this awareness of the need for special training, and the content of this aspect of social work is constantly growing.

[10] Bertha Capen Reynolds, "Re-thinking Social Case Work," *Social Work Today*, V (May, 1938), 5.

Without going further into the matter, it will be apparent that social work does operate on the basis of a charter that defines its objectives, sanctions its activities, and prescribes norms for its conduct through the medium of legal, ethical, and technical rules. The content of the norms will be implied throughout our analysis of social work, for norms and rules underlie and determine much that is done in the field.

The Material Apparatus of Social Work

The material apparatus through which social work is carried on consists of many very obvious means that are common to many undertakings and some that belong peculiarly to this occupation. Among the former are buildings and furniture and office equipment, money, postage stamps, automobiles, paper, pencils, notebooks, and so on. In the latter category might be listed case records, statistical devices particularly adapted to the needs of social work, food and clothing and other equipment for clients, books and journals of the profession, and, in club or settlement houses and institutions, a whole array of other means by which the needs of clients are met.

It is important to call attention to these very concrete objects that are continually used for carrying on the work, for otherwise discussion of what social work is (that is, the attempt to define it) is likely to lose touch with reality. By calling attention to the material substructure of any institution, a further purpose is served in that a close analysis of the uses to which the material apparatus is put and the reason for those uses leads to considerable understanding of the work that is being carried on.

Take first the most easily recognized parts of social work equipment: the buildings and their furnishings. We shall exclude from present consideration institutions such as training schools for delinquents, homes for orphans or aged, and settlement houses, clubhouses, and the like, and concentrate instead upon the offices through which the larger part of social work is carried on. Not just any building in any location is considered adequate. The selection of locale and type of structure gives concrete expression to the administrators' and the board's conception of the extent of need for the agency's services, the means through which it should be met, and the esteem in which they themselves hold the work.

Sometimes a family welfare agency, for instance, is based in a dilapidated building in a slum area, has shabby, ill-assorted furniture

and is not too clean. Sometimes its headquarters are in a well-cared-for office building in the center of the city; sometimes in a house in a prosperous residential district. Available finances may, of course, be an important factor in the choice of locale, but usually more than that is indicated by the selection. With improvement in location and equipment usually goes alteration in the agency's conception of the dignity and worth of its clients and the validity of their claims for service. The substitution of private interview rooms for open booths or tables in a large room, for instance, gives evidence of more than a desire to make the social workers comfortable. It shows that the private nature of the client's problems is being respected and that the interview has a purpose far beyond that of establishing facts which any applicant should be willing to reveal in public. A building which itself does not testify to poverty, rooms and space sufficient to provide for privacy, furniture that is clean, nice looking, and adapted to its purpose are all therefore considered a necessary means to carrying on social work efficiently and productively. Doubtless good social work can be done without them if the human beings concerned have unusual skill and good humor, but the relation of adequate equipment to effective work is much the same in social work as in any other profession. Doctors, lawyers, and newspaper editors can do good work with meager and old-fashioned devices. Some do better work under such conditions than others do with the best of equipment. But good equipment usually improves the quality of the output; poor equipment often handicaps it; and without equipment of any kind work is impossible.

The location and internal arrangement of the offices and the differentiation of furniture and other equipment in them also give concrete evidence that social work is organized. The variation from agency to agency in this respect is great. Some of the public services include in their material equipment offices in Washington's shining new monster buildings—or in buildings not so new or elaborate—where head administrators work with reports, charts, and statistical tables rather than with human beings asking for assistance, and where statisticians, research workers, writers, stenographers, and file clerks greatly outnumber professional social workers and so determine the characteristic features of the equipment. From these offices the hierarchy descends through regional, state, county, and municipal headquarters, and the material apparatus varies according to the needs of the work to be done. In a remote district of a thinly populated state, the office equipment may be meager indeed, and the chief material

means of carrying on the work is probably the social worker's car, fountain pen, and notebook, but the statistical cards and the form sheets in the case records link her work with that of the thousands of others all over the country.

Similarly private and local agencies vary in their equipment with the complexity of their organization and the human needs which they serve. In large cities the family welfare agencies are usually divided into districts with local offices where the face-to-face work with clients is carried on. Child placement agencies may operate over counties or even states and maintain quarters in various towns. In contrast to these complex organizations, with their specialized equipment in headquarters and local offices, there are social agencies in small cities and towns that offer numerous types of service—relief, child placement, consultation about family problems, visiting nursing, recreational facilities, perhaps even child guidance. They obviously have to have much greater variety in their material apparatus: playthings for children, club and game rooms for adolescents, medical equipment for nurses and examining physicians, and so on. On the other hand, these small-town agencies may confine their work largely to relief giving and may carry it on through the most elementary of instrumentalities—a desk, table, a few chairs, ledger books instead of case records, pens instead of typewriters, and orders on the grocery and dry goods store instead of cash or checks.

The analysis of the variation of equipment with agency organization could, of course, be carried much further, but what has already been said will perhaps suffice to make it clear that material apparatus and organization go hand in hand. Diversification and specialization of services and refinement of techniques require corresponding changes in such mundane things as buildings and furniture and office equipment, as well as in record forms and accounting and filing devices.

These latter parts of the equipment offer further examples of how social work—intangible as it is often thought to be—depends upon material objects for its functioning. Financial records, statistical records, individual case records are all very necessary parts of social work as it is carried on today, and no jibes about destroying humanitarianism by the introduction of business methods will alter that situation. All these record-keeping devices, developed in response to need, can be shown to be definitely correlated with practice and policy.

The financial records are an example. The more complex social work organizations become, the more necessary it is to have refined

methods for keeping track of how much money is spent and for what purposes. Regardless of the generosity of contributors and legislators, the amounts available are always limited. An unlimited fund upon which all in need might draw at will is inconceivable in this or probably any other society. Since funds are limited, record keeping—and the equipment necessary for it—enters social work as soon as account for the expenditure of funds must be made: that is, as soon as the money dispensed is not the private property of those dispensing it. This is necessary in order to insure a balance between demand and supply. Otherwise, to be generous to some clients may mean depriving others of all financial assistance; or, if one would argue that nobody is forced to starve, records are necessary in order to know when funds are running low and for what reasons. Again, financial accounting provides data necessary for that part of policy making which is concerned with apportioning funds among various needs and services. The division of expenditures among furniture and equipment, staff salaries, and grants to clients requires more than financial recording, but without the facts which this procedure supplies, policy about such matters could not be set up. Hence the financial deliberations of administrative officials of social work organizations, simple or complex, are dependent in part on the presence of pens, pencils, erasers, cards, filing cabinets, typewriters, adding machines, and so on, in the offices which supply them with information.

Individual case records—especially those that may be as much as several hundred pages long and so represent the expenditure of much time and paper—form another part of the material apparatus of social work that is sometimes considered unnecessary by those who deplore the introduction of science into what they call charity. Even brief consideration will show, however, that the use of all this paper is inextricably interrelated with the complex organization and with the values, legal rules, and technical knowledge of the profession. There are many reasons why case records are necessary; among them are the following.

Every case work situation begins with the formal or informal establishment of eligibility of the applicant for the agency's services. For the public relief agencies, the basic requirements are stated in the law; for the private agencies, policies about services to be given and persons to be accepted as clients are worked out by the executives and supervisory staff, subject to the approval, expressed or implied, of the board of directors and the contributing public. Each case therefore

begins with the case worker questioning, "Is this a person we are prepared to help?" and (it must not be overlooked) with the applicant saying to himself, "Do I want these services under the proffered conditions?" Good case work makes the answers to these questions, and the reasoning behind them, as explicit as possible. Case records are necessary, then, to preserve these data, for much of the future conduct of the work depends upon them.

Once a case is accepted, further recording is necessary, for the social worker must have a means of keeping in mind the client and his situation, the plans that have been made, and the results that apparently follow. If the case is transferred to another worker or if the client after a time makes another application to the agency, the record enhances the efficiency of case work by eliminating the need for much repetition of facts and by showing how the client is using the assistance the agency is giving. Again, records are the chief means through which supervisors learn about the clients and about the working methods and effectiveness of individual social workers. They also provide the data for evaluation of policies and for research into techniques; moreover, through them may be estimated the extent and quality of the clients' needs for the meeting of which the agency offers its services. These are but a few of the reasons for case records. They may be sufficient, however, to show that records are one of the most essential parts of the material apparatus of social work carried on by organized groups.

The analysis of concrete objects used in social work and the reasons for their being could be carried much further—as could all the topics covered in this chapter—and it may be instructive to those who are considering the subject for the first time to do so. The data so far presented would seem, however, sufficient to establish our main point: that social work is like other social institutions in having a material apparatus whose character is functionally related to the rest of the system.

Some Consequences of Having Established the Institutional Nature of Social Work

With this point confirmed, we come to the general conclusion that the activities that are clearly social work (social case work; certain aspects of social group work; and the planning, co-ordinating, administrative, financial, and research work that goes along with them)

form a system that has the characteristics of a social institution. Whether other activities, such as general social welfare planning and the recreational and educational aspects of group work, are also a part of the institution can be determined only after the institution's function is clearly seen. For, according to Malinowski's theory, each social institution—especially in complex, modern societies—can be shown to have a primary function to which other functions are dependently related. If then, through an analysis of the work done, we can discover just what main function these social work activities serve, we shall be able to judge more accurately the limits of the field.

By the finding that social work is an institution, two things are accomplished. On the one hand, some standards are set up by which one can judge whether or not certain activities should be considered social work. On the other hand, the search for social work's peculiar contribution to the satisfaction of human needs is facilitated.

The following examples illustrate the first of these accomplishments. According to the institutional criteria, activities to be considered social work must be organized, carried on by specially designated personnel, and conducted by means of a material apparatus, in accordance with values and technical and legal rules that guide the profession. For example, the numerous efforts of individuals to relieve social or economic distress on their own responsibility and on the basis of their own conception of what is good for people are thereby excluded from social work. Frequently these efforts, which may range from giving money to beggars on the street to helping political refugees find jobs or giving shelter to homeless children, are not organized. They are often conducted in a manner that is innocent of the technical rules of social work. They are carried on by individuals on their own initiative rather than through special designation and authorization. Even if the activities meet one or the other of these criteria, they still would not be considered social work, for to qualify as belonging to the institution of social work they must meet all of them.

By this standard, for instance, an individual who, on his own initiative but in the light of his knowledge of the theory of social work, counsels with his friend or neighbor about the latter's marital problems is not thereby a social worker. Nor are the charitable activities of the duly appointed representative of a church congregation a part of social work if they are carried on in accordance with the individual's or the congregation's convictions but without benefit of

knowledge of the theory and rules of social work. Similarly, even the activities of many poor law boards and other officials who dispense relief and those of many probation officers and others who deal with juvenile delinquents would not be considered social work if they are carried on in accordance with values (such as those that sanction force or moral suasion) or technical rules (such as those that seek to make the granting of relief an automatic procedure) that are at variance with those that are contained in the charter of social work.[11]

The elimination of these activities from the field of social work does not imply that they are valueless or that it would be preferable to substitute organized, institutionalized social work for them. The gain we are emphasizing here refers only to the clarification of the concept social work. Nor do we mean that the rules and values of social work are fixed and immutable. In fact, just the opposite is true of them. Nevertheless, there is at any one time in any profession a core of agreement about the content of practice that holds the group together in spite of wide variation of opinion on many subjects.

This conclusion with regard to the limited applicability of the designative term may appear to be dogmatic when applied to social work, but it is taken for granted when other professions are under consideration. Organized medicine, for instance, does not include the activities of mothers who "doctor" their children or those of laymen who give medical advice to their friends. It does not, in our culture, include the work of faith healers or powwow doctors or those who dispense patent medicines on street corners, for, regardless of how therapeutically beneficial the efforts of these people may be, they are not embraced by medicine's charter or conducted in accordance with its rules.

The necessity for these exclusions follows from the fact (to be elaborated upon in the following chapter) that in all cultures the activities that are necessary for human survival and well-being are institutionalized; that is, they are organized and sanctioned and conducted in accordance with norms and under regulations that insure their standardization and official control. Sporadic or unorganized or unauthorized activities directed toward the same ends are likely to

[11] There are additional reasons—largely related to the function of social work—why some of the activities of public-relief and court officials are not social work. It should be noted, however, that social work is often carried on within the probation and public assistance systems. For a detailed analysis of the relation of social work to public assistance and probation see Chapters VII, X, XIII, XV.

parallel the institutionalized activities, but the human needs that call all of these efforts forth are of such prime importance that their satisfaction cannot be left to the random or unsupervised efforts of unorganized or unskilled individuals.

This fact is so well recognized with respect to medicine and law and education that there is little dispute about who is to be called a doctor or a lawyer or a teacher. That the situation with respect to social work is different indicates that the needs that social work satisfies are not yet clearly recognized; hence the concept is not yet clearly defined in our vocabulary. We have shown, however, that in spite of the lack of popular recognition, social work is institutionalized. We have next to make clear why this development has taken place; that is, what important human needs social work serves.

The second of the accomplishments effected by the establishment of social work as an institution is somewhat different in nature. Its value lies in the indication it gives us to seek the function of social work through an analysis of its relationship to other social institutions and to the needs of individual human beings. This is in accordance with the reasoning set forth in Chapter I, where it was shown that the first part of the process of inquiry consists of making clear what is problematical about a situation, disclosing its known elements, and testing, by reference to observed facts, an idea or hypothesis under which they may be comprehended. That is what has been done so far. We first noted some of the reasons for regarding social work as vague and indeterminate, and we listed briefly some of the aspects of it that are clear. These facts suggested that the proposition that social work is a social institution was an idea worth investigating. The present chapter was accordingly devoted to inquiring whether the agreed-upon aspects of social work have the characteristics of a social institution as that term is defined by one who has studied social organization closely. The evidence set forth—admittedly not complete—led to the conclusion that the proposition is correct. We are therefore in a position to use this proposition to learn more about social work, for once social work is established as a social institution all that is known about social institutions is applicable to it.

One of the most important facts about social institutions is that they are interrelated and that the functions of any one of them can accordingly be learned only through examining how the given institution operates in conjunction with other institutions to meet human

needs.[12] Applied to social work, this indicates that our search for an understanding of that institution must be directed to discovering not only to what needs its activities are a response but what part it plays in relation to other institutions in meeting those needs. Since such an analysis requires, however, a clear understanding of social organization in general, and why it is necessary, and what an inability to participate in organized activities entails for an individual, it is to a description of those aspects of institutions that the next chapter is devoted.

Suggestions for Further Study

Brown, Esther Lucile, *Social Work as a Profession,* Russell Sage Foundation, New York (2d ed.), 1936.

A survey of the scope of social work, its personnel and its organization, and a brief analysis of demand for social workers and the salaries offered. The latter figures do not give a very accurate picture of the present situation.

Devine, Edward, "Some Ideals Implied in Present American Programs of Voluntary Philanthropy," *Publications of the American Sociological Society,* VII (1912), 179f.

Elliott, Lulu Jean, *Social Work Ethics,* American Association of Social Workers, New York, 1931.

Reviews the various attempts at framing a code of ethics for social workers and proposes a composite one. Bibliography.

Hamilton, Gordon, *Social Case Recording,* Columbia University Press, New York, 1938, p. 104.

The reader is referred to this book not so much for the detail of its content as for its value in illustrating that social work is highly technical.

[12] This is the "functional" theory of culture. Concerning it Malinowski says that it "aims at the explanation of anthropological facts at all levels of development by their function, by the part which they play within the integral system of culture, by the manner in which they are related to each other within the system and by the way the system is related to the physical surroundings. . . . The functional view of culture lays down the principle that in every type of civilization, every custom, material object, idea and belief fulfills some vital function, has some task to accomplish, represents an indispensable part within a working whole. The better a custom [or an institution] is understood the clearer it becomes that it does not sit loosely within its context, that it is not a detachable unit like the petrifact in a rock but that it is organically connected with the rest of the culture."—Bronislaw Malinowski, "Social Anthropology," *The Encyclopaedia Britannica,* 14th edition, XX (1929), 864.

Kahn, Dorothy, "Conserving Human Values in Relief Programs," *Proceedings of the National Conferences of Social Work* (1941), pp. 308–19.

A description of what is involved in making effective citizens' rights to public assistance. Lists some of the ethical concepts on which social work is based.

Kelso, Robert, *The Science of Public Welfare,* Henry Holt and Company, New York, 1928.

Chapters VI–VIII discuss charity franchises and the law of charitable trusts, thus illustrating some of the legal aspects of social work.

Lowry, Fern, "Current Concepts in Social Case Work Practice," *Social Service Review,* XII (1938), 365–73.

An illustration of the rules and values on which social case work is based.

Taylor, Graham Romeyn, and Mary Van Kleeck, "The Professional Organization of Social Work," *Annals of the American Academy of Political and Social Sciences,* CI (1922), 158–68.

White House Conference, 1940, *Children in a Democracy,* D. Appleton-Century Company, New York.

A report of the Conference findings that makes explicit some of the values on which social work is based.

Chapter IV

THE NATURE OF SOCIAL DISABILITIES

In Chapters II and III it was fairly well established that the agreed-upon aspects of social work have the characteristics of a social institution; that is, that they are organized and regulated and are carried on by a specially designated personnel that wields a material apparatus in accordance with rules and norms and values that are officially approved and transmitted from generation to generation of practitioners. As a social institution, social work acts in conjunction with other social institutions in meeting specific human needs. We must consider next, then, what those needs are that call social work into existence—needs that are so vital that their satisfaction cannot be left to the unorganized, untutored, spontaneous activities of magnanimous individuals.

A clue to the category of needs toward which social work is directed is furnished by the often repeated statement that social work has to do with helping people who are in difficulty in their social relationships or who are socially handicapped or who are out of adjustment with their social environment. The activities of social workers are said to be directed toward removing these handicaps or toward effecting adjustments between individuals and the social order. This description of social work's aims lacks clarity, however, because the terms "social relationships," "social environment," and "socially handicapped" have never been concretely defined. Accordingly, although the specific activities of social workers can be listed, the function they serve cannot be accurately stated because the common element in the clients' disabilities is only vaguely comprehended.

It is our belief that clarity in this area can be achieved only through understanding the nature and function of social organization in general. If it is clearly seen what purposes social groups serve, why membership in them or use of their services is necessary for individual well-being, terms such as "socially inadequate," "socially handicapped,"

and "suffering from social disabilities" will have more meaning, and a basis will be laid for analyzing more specifically the nature and function of the services that social work renders.

The key to the whole puzzle is a clear realization of the fact that human beings cannot exist in isolation. At every turn they are dependent upon organized groups for the satisfaction of their needs. In fact, they become human only through association with others of their kind. Association is so vital for each individual's development, and group efforts are so necessary to assure the continuity and functioning of society as a whole, that organization can be regarded as almost the basic fact in human existence. To comprehend the implications of these statements one must understand clearly why organization is necessary and what is accomplished through it, what characteristic forms it takes, and what it means to an individual to be unable to play his part in an organized group.

Why Social Organization Is Necessary

Analysis of social organization can well start with the observation that all human beings have certain biological needs that they can satisfy only through association with other people. Even fanciful accounts of individuals subsisting alone usually assume that the people concerned had some knowledge and some sense of what was desirable which they must have secured from others by means of language and social organization. When the stories do not assume these facts, they posit for human beings a set of instincts (such as the ability to select proper food and to find a mode of shelter) that does not exist in actuality.[1]

Basic biological needs and how they are met

Mankind's basic biological needs can be classified in various ways, but as grouped by Malinowski they are the following: the need for nutrition, reproduction, bodily comforts, safety, relaxation, movement, and growth. Most of these are self-evident. That people must have food, shelter, clothing, and protection against environmental dangers and ill-health no one will deny, and it is equally obvious that reproduction is necessary for race survival, even if some individuals remain

[1] See Arnold L. Gesell, *Wolf Child and Animal Child,* Harper & Brothers, New York, 1941, for a unique illustration of how dependent upon human association children are for learning even how to walk in a human manner.

celibate.[2] Relaxation, movement, and growth are equally important for human welfare. The first of these terms refers to the fact that people live according to certain rhythms of work, recreation, and rest, while the second—somewhat associated—has to do more specifically with the exercise of the physical and nervous system. An opportunity for growth—physical, mental, and emotional—is another requirement of the human animal, denial of which brings maladjustment and even death.

These biological needs mankind shares with other animals, but the means by which they are satisfied are characteristically human. For the distinguishing fact is that human beings cannot satisfy their needs except through the medium of culture.[3] Even in matters of nutrition it has been pointed out that "the individual human being does not act in isolation; nor does he behave in terms of mere anatomy and unadulterated physiology. . . . Appetite or even hunger is determined by the social milieu. Nowhere and never will man, however primitive, feed on the fruits of his environment. He always selects and rejects, produces and prepares. He does not depend on the physiological rhythm of hunger and satiety alone; his digestive processes are timed and trained by the daily routine of his tribe, nation, or class. He eats at definite times, and he goes for his food to his table. The table is supplied from the kitchen, the kitchen from the larder, and this again is replenished from the market or from the tribal food-supply system. . . . 'Table,' 'kitchen,' etc., refer to the various phases of the process which separates the requirements of the organism from the natural sources of food supply. . . . They indicate that at each stage man depends on the group. . . ." [4]

As it is with the need for food, so it is with the other basic needs that are listed above. Even reproduction is culturally determined. A host of man-made requirements and attitudes surround it, so that

[2] In this connection Freud's theories, which show that sexual impulses may be satisfied in many and devious ways, are important. Each culture provides numerous means of sublimating the sexual drives; but if they do not find some acceptable form of expression it is believed that the effect on the individual is very deleterious. If this is so, the need for sexual expression can be considered a need as basic to individual survival as it is to that of the group.

[3] Culture is defined by Malinowski as "the body of commodities and instruments as well as of customs and bodily or mental habits which work directly for the satisfaction of human needs." "Culture," *Encyclopaedia of the Social Sciences,* IV, 625. See this article for an elaboration of the theory of social organization described in this chapter.

[4] Bronislaw Malinowski, "The Group and the Individual in Functional Analysis," *The American Journal of Sociology,* XLIV (1939), 943.

the individuals concerned choose each other by reason of standards of beauty and duty that have been impressed upon them from childhood. As Malinowski puts it, "The full satisfaction of the [sexual] impulse, as well as the socially legitimate effect of it, is subject to a whole set of rules defining courtship and marriage, prenuptial and extra-connubial intercourse, as well as the life within the family. The individual brings to this, obviously, his or her anatomical equipment, and the corresponding physiological impulses. He also contributes the capacity to develop tastes and interests, emotional attitudes and sentiments. Yet in all this the group not only imposes barriers and presents opportunities, suggests ideals and restrictions, and dictates values, but the community as a whole, through its system of legal rules, ethical and religious principles, and such concepts as honor, virtue, and sin, affects even the physiological attitude of man to woman. Take the most elementary physical impulse, such as the attraction of one sex by another. The very estimate of beauty and the appreciation of bodily shape is modified by traditional reshaping: lip plugs and nose sticks, scarification and tattooing, the deformation of feet, breasts, waist, and head, and even of the organs of reproduction. In courtship and in selection for marriage such factors as rank, wealth, and economic efficiency enter into the estimate of the integral desirability and value of one mate for the other. And again the fullest expression of the impulse in the desire for children is affected by the systems of legal principle, economic interest, and religious ideology, which profoundly modify the innate substratum of human physiology." [5]

If the other basic needs were examined, a similar dependency on organized group activities would be found. Mankind can do nothing alone. Robinson Crusoe survived only because he took to the desert island conceptions about how he could and should live and technical knowledge by means of which he made them effective. Nor did instinct provide him with these necessary means of survival. He knew what to eat and how to prepare it and by what ways and what means to shelter and protect himself because he was the product of a culture of which this knowledge was a part.

Instrumental requirements of a culture

To be more specific about what mankind has to have for survival, the first and most obvious requirement to be noted is that which has

[5] *Ibid.*, pp. 944–45.

been called in the preceding chapter a material apparatus. This comprises all the man-made objects in the environment: facilities for the production and distribution of goods and services; for transportation, recreation, education; for providing shelter, nourishment, and protection; for safeguarding health; and for giving aesthetic or spiritual comfort and pleasure. Translated into concrete terms the list would include such varied objects as machinery, grocery stores, railways, amusement parks, books, houses, police cars, medical supplies, art galleries, and churches. The increasing complexity of society is testified to by the growing list of such objects, but the needs they serve remain constant under all forms of social organization.

The presence of a highly developed body of material equipment would not in itself insure that a given individual could meet his biological needs. A Borneo savage would be as ill served by an Automat as a chorus girl by the communal meal of a cannibal tribe. To use equipment, knowledge is necessary, and closely associated with it are social standards and values as to what is good, acceptable, and necessary, and what is dangerous or forbidden. It is a trite observation among social workers that clients who have recently emigrated from Southern Europe are likely to use bathtubs as coal bins and to refuse certain types of food that American dietitians deem healthful. If knowledge and values are necessary for the enjoyment of the material goods that are at hand, they are even more necessary for using equipment for productive purposes. Tools and factories are useless in and of themselves. In fact, the more one thinks about it, the more clear it becomes that knowledge and a system of values underly the whole material apparatus of a society and are an antecedent condition for both its production and its use.

Behind knowledge and values, as means by which a human being satisfies his desires, stands language. By it knowledge is passed on from person to person and preserved from generation to generation; the activities of the individuals who use the material equipment for production or consumptive purposes are co-ordinated; techniques are standardized and values are expressed. Language is not a mystical set of arbitrary sounds whose meaning is somehow contained within them (as has sometimes been held), but it is a body of vocal customs that each individual learns through association with others. As an infant he gradually finds that if he makes certain sounds certain results follow, and as he grows into childhood and youth he comes to realize that the more exact control over his environment he desires, the more

detailed and the more precise must be his language. His understanding, use, and control of technical processes are dependent upon an enlarged vocabulary. Only through language can he work with other people, do their bidding, and influence them to do his.

By means of these various social devices, then, the human animal is enabled to exist and develop in a world in which he would certainly soon perish if left to find his way alone. Born into a social group, however, he finds at hand a vast body of material equipment which he is taught to use, and a complicated system of customs (included in that term is language as well as other ways of life) which shape his attitudes and mold his desires. By means of them he is enabled to satisfy his basic biological needs.

But the story does not end there. These modes of satisfying biological needs create in the individual further needs. Equipped with language, knowledge, and a sense of values, the human creature is, in a sense, rendered more vulnerable because he has learned to think. He can see that for all his knowledge there is much which threatens his well-being and over which he has little control. The vagaries of the weather trouble the farmer and the sailor; the vagaries of the business cycle trouble the businessman; the vagaries of love trouble all. Some sort of control over these unpredictable, accidental occurrences is necessary for the individual's peace of mind. Similarly, knowledge brings to the individual the recognition of the inevitability of death, but it does not save him from the emotional upheaval and the possible breakdown of his sense of values which accompany that knowledge. If the individual is to maintain the disciplined balance which participation in group life demands, some means of satisfying these needs which culture itself creates must be provided. Religion—in the broadest sense of the word—has been the universal means developed to meet certain of these needs, while, in primitive groups at least, systems of magic,[6] as the anthropologists call them, provide a sense of control over the unforeseeable and unpredictable. These, then, must be added to the list of means with which communal life equips the individual to satisfy his strivings.

All of these means of satisfying biological needs and the other needs derived from them are made available to individuals through social organization. The material apparatus must be produced and

[6] Magic is defined as "a ritual act performed to bring about a practical result unachievable by man's unaided force."—Bronislaw Malinowski, *Authority and the Individual,* Harvard University Press, Cambridge, 1937, p. 159.

provision for its constant renewal be made. To that end an economic organization is developed through which goods are made and stored and distributed, and individuals are enabled to exchange their labor for money with which to purchase these goods. The transmission of language, knowledge, and values cannot be left to chance contacts between individuals but requires the formation of complicated structures—families, schools, churches, the professions, science, art—which endure from generation to generation. Organization is further required to insure that life and property shall be protected, that sexual drives shall be regulated, that remedial measures in time of illness shall be instituted, and so on. In a word, organization is implicit in every aspect of human life.

Social organization is necessary, then, because human beings cannot meet their basic biological needs without it. In the infant this is seen most clearly. His life is dependent upon the nourishment, care, and protection afforded by his parents, who are organized into a family group in order—among other things—to give these services to their offspring. But parents can give these services only if they have a dwelling place, furniture, clothing, food and the means of preparing it, and so on down a list of perfectly obvious requirements of a material nature. These have been produced through social organization in the form of industry, agriculture, marketing, and the like. To use the objects requires knowledge, which parents have acquired through schools and other forms of social organization. Trace as you will the means by which the needs of infants and adults are secured; you will find that underlying each and all of them is the fact of organized human activities.

Forms and Functions of Social Institutions

Social organization is not a vague, over-all something by means of which services are provided and obligations imposed upon individuals, but it is manifested in concrete form at every turn. People are joined together in families, in neighborhoods and states and nations, in industrial, commercial, or professional enterprises, and in associations for mutual benefit or enjoyment. In some societies sex or age or race provides other bases for union to fulfill specific purposes.

The groups that fulfill vital purposes cannot be ephemeral organizations building up *de novo* their rules and practices; they must be socially sanctioned and long enduring and be able to base their

activities upon long-established knowledge, even as they seek to advance that knowledge for their own improvement. In short, the enterprises in which people join for the benefit of others or for their mutual benefit must be institutionalized if they are to have more than passing value for the satisfaction of human needs.

The number and variety of institutions in modern civilized societies are manifold. They embrace both individual organizations (such as schools, hospitals, business enterprises) and the broader organized activities that unite or cut across them, such as the professions of medicine and teaching, trade-unions, and manufacturers' associations. Malinowski's researches led him to conclude that institutions can be classified into the following eight categories: family, neighborhood, state (the political organization), nation (the culturally integrated unit), occupational groups, free associations, and the groups based on status, race, or age.[7] Social work, according to that classification, belongs with the occupational groups into which people are organized on the basis of work to be done or services to be rendered in order to satisfy human needs. As such it is classified not only with the other professions but also with industrial, commercial, and agricultural institutions, in recognition of the fact that all of these come into being in order to supply goods or services.

It is important to note that institutions do not correspond exactly with types of activities that must be carried out in order to meet human needs. One institution may have several functions, and a given function may be performed by several institutions. For instance, the family has educational, economic, legal, and sometimes religious duties, as well as that of safeguarding procreation. Conversely, education is carried on not only by schools but also by parents, employers, and professional associations. This amalgamation of functions within single institutions occurs because human needs are so interrelated that in the satisfying of one need others are involved. For example, the caring for children by family groups necessitates a dwelling place (thus the institution caters to the need for shelter and protection against the elements), the preparation of food, traditional standards according to which children's behavior can be regulated, a division of duties among parents and children along economic and social lines, and so on, including legal arrangements by which the parents' status and property

[7] In certain societies age, race, rank, caste, and economic class form bases for organization that is institutionalized.

can be passed on to the children in order to insure their future livelihood.

In spite of this multiplication of functions within single institutions, each type of organized group tends to have at least one primary function, the other functions usually being auxiliary to the main one. This is particularly true in complex, modern civilizations, where there is a tendency to multiply institutions and to simplify their functions. We hear much nowadays about how various functions of the family are being taken over by other organized groups: that food and clothing are no longer prepared at home and that nursery schools are supplanting parental influence; but, for all that, the primary function of the family (to provide for the nurture and rearing of children) remains, and social and psychological research continually provides fresh evidence as to why this must be so.

The picture of society which emerges from this analysis is that of groups of people banded together to carry on activities that are directly or indirectly necessitated by mankind's biological needs. In their activities the organized groups are guided by values, traditions, and legal and technical rules; and the activities themselves are directed toward certain ends—sometimes not well recognized by the participants [8]—and perform certain functions with respect to society as a whole.

In order to understand social work and its place among other social institutions (that is, to understand why it exists and for what purpose), it is necessary to see this organization of society very concretely. It is not enough to list in abstract terms the functions, for instance, of the family. One must understand in concrete terms just what benefits individuals derive from it, what services it performs. It is instructive to view the problem of institutions from both of these angles—from that of the individuals' needs and that of the organized group's services—for something missed in one view may be revealed in the other. The result of such an analysis of needs and functions will be a deepening of the conviction that no person can exist in

[8] There is often little conscious recognition by individuals that their acts are serving social purposes. For instance, people seldom marry and have children in order to continue the race, nor do artists express their thoughts and emotions on canvas in order to heighten the sense of group solidarity. Such acts, however, help to achieve those ends, and if they are never performed, the community and the culture cannot continue. The distinction in this connection is between the individual's needs and those conditions which must be fulfilled if the group is to survive. The first are consciously present in individual minds; the latter are logical derivatives of the fact that people must co-operate or perish.

isolation from his fellows, and the conclusion will naturally follow that any breakdown in the network of mutual assistance will have disastrous consequences.

This is a fact that was long ago recognized but is sometimes forgotten. Thomas Aquinas summed up the situation well in his *Commentary on Nicomachean Ethics:*

> Man is called by nature to live in society; for he needs many things that are necessary to his life, and which by himself he cannot procure for himself. Whence it follows that man naturally becomes part of a group, to procure him the means of living well. He needs this assistance for two reasons. First, in order that he may obtain the elementary necessities of life; this he does in the domestic circle of which he is a part. . . . But there is a second reason why the individual is helped by the group, of which he is a part, and in which alone he finds his adequate well-being. And this is, that he may not only *live,* but live the *good life*—which is enabled by the opportunities of social intercourse.

The Individual and the Organized Group

To meet his biological needs and those that are derived from them, each individual, then, must be assured a place in numerous organized groups and must be enabled to make use of such groups' services. A position in some groups is secured by birth; others require the possession of suitable knowledge, skills, attitudes, character traits, or financial resources. Since these are dependent in large part upon preliminary training or status, it follows that the group affiliations that are acquired by birth are of primary importance. These are memberships in family, state, and nation. Together they go far toward determining the individual's customary ways of behaving, his rights and duties in other social relationships, and his ability to function effectively therein.

Through membership in a family, for instance, individuals are normally provided with—or provide each other with—shelter, food, and clothing, which are secured either ready-made through the payment of money or are produced or prepared by the family members. Through this organized group relationship—legally sanctioned and enduring for life unless due cause for its breakup can be shown—the members are also assured (in theory, if not always in fact) of security in affection and in social status. They have a right to expect loyalty from each other, material and emotional support in time of trouble,

and a sense of belonging that is not as dependent on good conduct and unselfishness as is usual in other personal relationships. In addition, individual members of a family derive special benefits and have special duties. The husband and wife, for instance, are legally permitted to have children and to secure financial support from them in old age. They have many duties toward their children, some of which the law enforces, other of which are less obviously sanctioned. Parents provide for their children's early instruction in language and social customs, ranging from cleanliness and control over excretory functions to morals and manners. They teach them what is allowed and what forbidden in the larger social group to which they belong; what is considered true, good, and beautiful. They give them protection and legal status, a name and a right to inheritance. In fact, the family makes contributions toward meeting all the basic biological needs of its members and some of the socially derived ones as well. It is doubtless in this wide character of its functions that the explanation of its universality is to be found.

Through membership in school and other training groups, children, more formally than in the family, are inducted into the ways of the society to which they belong. They are given an opportunity to acquire knowledge and skills that will help them to earn a living, take part in social and political enterprises, and share in the cultural heritage. Later, membership in occupational groups becomes increasingly important, for by this means individuals (men, in particular) not only exchange their labor for the wherewithal to purchase commodities and services but are given an opportunity to exercise their skills and to secure that social prestige on which so much of their self-confidence depends. Membership in other kinds of groups brings additional benefits to the individuals concerned. Among these may be noted religious organizations, those for recreational pursuits, trade-unions and mutual benefit associations, as well as those large associations in which membership is often automatically secured—state and nation.

Then, less obvious in its group aspects, is the fact that people are dependent upon doctors, lawyers, police, and so on, for services that are vital to their well-being. The activities of these latter people are institutionalized, but those who use their services do not so much become a part of an organized group as make use of an institution that exists apart from themselves. Sociologically considered, this is a considerably different situation from that of actual group membership,

though it is to be noted that these organized services could not continue to exist without their patrons. Psychologically, however, there is much in common between the two situations from the individual's point of view, for whether a person belongs to an organized group (such as a family or a trade) or seeks the services of such a group, his ability to derive benefit from either of these experiences is often dependent upon much the same factors, among which acceptance of its values and customs and feeling of need for its services are particularly important.

In general, then, individuals meet certain of their needs through membership in groups in which they have certain rights and certain duties. They meet other of their needs by utilizing the services of the groups that are set up for these special purposes. Both of these processes require knowledge, willingness to co-operate, and, frequently, money. These requirements become more difficult to fulfill as society becomes more complex, as the customs and values of the people who compose it become more varied, and as the leeway given for the development of individuality is increased. In this situation, also, the functions of particular organized groups become more restricted and specialized, with the probable consequence that more and more people find difficulty in adapting themselves to the requirements of organized groups or in making use of their services.

Consider, for example, the medical profession and the public's use of its services. In urban areas, at least, medical practice has become increasingly specialized, and there has been more and more use of clinics and hospitals. This has meant that physicians are less and less likely to have the long-continued contacts with families through which they formerly acquired much understanding of their habits of life and ways of thinking and became themselves accepted as trusted counselors and friends. Correspondingly, the communities in which physicians practice have tended to become less homogeneous; the divergence among the inhabitants in standards and customs about health care has probably become greater (although this is in part counteracted by increased activities in the field of health education); and the patients' economic resources have not increased in proportion to the demands made on them by the treatment procedures of modern medicine. For these and other reasons the gulf between doctors and patients has been growing wider, and more and more patients find difficulties in making good use of what the profession offers—and this at a time when

doctors themselves are becoming increasingly aware of the subtle interrelationships between attitudes of the mind and ailments of the body.

There are numerous factors that may make an individual's participation in organized groups difficult. In modern societies the services of such groups are procured or membership in them maintained largely through the medium of money; consequently, lack of the means of earning or otherwise securing money is a serious handicap to their utilization. In addition, ignorance or psychological peculiarities or the possession of values and customs differing from those of the majority of people may handicap an individual in belonging to or making use of the services of organized groups. To put it in slang terms, he may not know his way around: how to find a satisfactory dwelling place for a small amount of money, how to bring his grievances to the attention of a court, how to insure his financial protection against disasters, how to collect the pension that is due him. As a more or less emotionally maladjusted person he may find it difficult to manage his family life smoothly, to profit from the educational regime, to get along with his employer so that he can keep his job. As a foreigner or one who grew up in some isolated section and now lives in a large city, he may have different standards about such things as child care, education, and discipline, food values, household management, religion, the settling of disputes, sexual conduct, the treatment of illnesses, all of which may set him apart from organized groups and make it difficult for him to utilize their services effectively.

Sociologists have not paid much attention to these aspects of the matter. Together with economists, lawyers, political scientists, and others who are interested in particular kinds of institutions, they have been chiefly concerned with analyzing institutions and their functions and considering why they do not always operate adequately. The question of why some individuals are not able to make use of the available organized groups, are not able to operate satisfactorily in the area of group relationships has rarely been considered in general terms, though psychiatrists, psychologists, criminologists, social workers, and others have had much to say about specific aspects of this problem.

Perhaps the situation is one of those that are so obvious, so taken for granted, that they escape attention. However that may be, it is a fact that human beings have to participate in the life of organized groups and have to use the services of organized groups if they are to survive. All do this to some extent. They learn to speak (most of

them) and acquire at least a minimum of knowledge and values through family, school, church, and other group associations, or by using the products of group enterprise. They obtain shelter and clothing and nourishment through families, or substitutes for families, when they are young; and they secure maintenance through these and other associations when they are older. And so on, as has been pointed out above.

But many individuals do not do these things very effectively. Sometimes the fault or the reason for the lack of effectiveness lies within themselves, sometimes within the institutions. Sometimes the cause is to be found in the complexity of society, so that while the services of groups are available for meeting peculiar needs (such as resources for caring for feeble-minded children or for securing treatment for some particular disease, or for learning how to manage a household), those who need such help may not know about the organizations. Whatever the cause, it is a fact that family life does not always run smoothly, that children do not always use the opportunities which schools offer to develop their capacities to the highest degree, that some people are prevented from making the best use of medical facilities, that some have difficulties in finding and keeping jobs, and that these difficulties are not always attributable to inadequacies either in themselves or the economic system.

The fact is that, much as social organization is needed, individuals do not find it easy to play their part in organized groups. In the first place, they have to be trained to do so, and psychologists and psychiatrists have much to say about the influence of parents' attitudes on children's ability to become socially co-operative. Then the content of the training has to be taken into consideration. People may be very well able to play their part in group life and derive the expected benefits from it in one culture and then find themselves confused and antagonistic to the rules of the game when they find themselves in another culture. Nor is such a change of culture dependent upon the individual's moving to a foreign country. There are many different culture groups within any large city—based on nationality, race, economic status, profession, and so on; and some aspects of cultural values and standards and modes of behavior change so rapidly that even the fact of age may dispose a person to find adjustment to and use of organized groups difficult. In addition, there are factors of mental capacity, personal flexibility, attitudes toward authority, initiative, and ambition which, among countless others, determine how much benefit

an individual can derive from group association. "Life is hard," it is frequently said, and much of its hardness derives from the fact that each individual must renounce so much in order to secure the satisfaction of his basic needs and the fullest expression of his own capacities through social co-operation.

The Meaning of Social Maladjustment

It is difficulties such as these which are usually meant when it is said that an individual is socially maladjusted, that he has trouble with his social relationships, that he is socially handicapped or suffers from social disabilities. And it is from among people who have difficulties of this nature that the clients of social agencies are drawn. The point has more importance than would appear at first thought, and we shall have much to say about it later. Here, however, it is only necessary to clarify the concept.

The term "socially maladjusted" is often used in a less specific sense to indicate that there is something vaguely wrong with the person in question. He can't get along with other people; he doesn't fit in properly; he is ignorant or feeble-minded or neurotic; or he has not had the "advantages" which have been vouchsafed to most people. In fact, the words "social adjustment" and "psychological adjustment" are often used almost interchangeably, so inured have we become in recent years to thinking that all relationships are psychologically determined. Clinical psychiatrists, however, are well aware that some people who participate most ably in certain group enterprises have serious personality problems and that, in general, there is a real distinction between the social and the psychological aspects of human behavior. What the social aspects consist of, the sociologists have described, but the precise implications of their discoveries have often escaped the attention of those who would define social relationships, social maladjustments, and similar terms.

Accepting the functional theory of social organization, we would suggest that these terms refer to the ability or lack of ability of individuals to operate effectively within specific organized groups or to make use of such groups' services. With reference to the family, for instance, the term "socially maladjusted" or "socially handicapped" refers to the presence of factors that keep an individual from receiving the benefits that organization along family lines is designed to afford. These may be intrapsychic factors, it is true, but they may equally

well be those of lack of money, ignorance, divergent customs and expectations among the family members, bad health, poor housing arrangements—all of which may create tensions and anxieties that are referable to the immediate situation rather than to total personality maladjustment.

In the use of the services of a school or a hospital, an individual is socially maladjusted who cannot wholly accept what these institutions have to offer. Here the source of the difficulty may be found to lie in the institution rather than in the individual in question, or both may have to modify their ways before effective use can be made of the services. But in so far as the difficulty can be traced to the individual, it will be found that he is far from necessarily one who is psychologically maladjusted in all of his relationships. A man may be a most effective father, carrying out all the duties to his wife and children which the institution of the family imposes upon him and receiving the benefits of family life in both their objective and subjective aspects. He may be an excellent and conscientious workman. He may be a much-loved leader in his lodge or club. But as a hospital patient, for instance, he may be most recalcitrant, unable to use the doctors' advice or to accept the nurses' help. The causes will vary with the individual case. The patient may be worried about the cost or about what the illness implies; he may not accept the doctors' theories as to the cause of the disease; or he may resent his helpless position. The point we would make is that social maladjustment is a term referring to actions within particular group settings and does not carry with it any implications as to causes.

In the example cited it is easy to see that the individual in question is kept from obtaining the full benefits which the social institution, the hospital, has to offer. Similarly, if the hospital staff carry on their work in a way which arouses anger and resistance among the patients (charge too much for the services, use methods that are unnecessarily painful, disregard the patients' opinions and customs), difficulties in social relationships arise that are specific to the situation and are not necessarily encountered by either the hospital staff or the patients in their dealings with other groups. We do not customarily call a hospital staff socially maladjusted when they behave in that manner, especially if in so doing they are acting as representatives of the organized group rather than in an individual capacity; but it is sometimes said—though usually in a somewhat different connection—that a particular hospital has poor public relationships,

indicating thereby that it conducts its business in a way that offends people and restricts its possibilities of being of service.

It would appear, then, that difficulties in social relationships may arise either within groups or between groups and the individuals whom they would serve. The term "social maladjustment," as generally used, does not cover these situations adequately. The people concerned are not necessarily poorly adjusted, in the sense that they have been molded in such a way or cannot modify their wills in such a way as to accept the obligations that work with a group imposes. This may be the case in some instances, of course. But the wider fact which the phrase "having difficulties in social relationships" implies is that some factors are present which keep the individuals concerned from achieving the ends that they joined together to secure or from using the services that other groups offer.

This institutional description of the nature of social disabilities sets them clearly apart from difficulties of a psychological nature. Intrapsychic difficulties are generally revealed in interpersonal relationships, and consequently often interfere with the use of social institutions, a fact that has served to confuse the issue with respect to social disabilities. But social disabilities are both wider and narrower than psychological ones: wider in that they spring from much more diverse causes, and narrower in that they refer to particular group relationships and not to relationships with individuals without reference to institutional setting. When it is used in this sense, the word "social" attains a precision that it otherwise lacks, and social relationships are thereby distinguished from personal or psychological ones.

Although the word "social" is seldom so explicitly defined, examination of the way it is frequently used reveals that such is its implicit meaning. An individual's social adjustment is judged by his behavior in his family, school, neighborhood, club, or occupational group. Socially acceptable or socially desirable behavior (a term frequently used by child guidance workers, criminologists, teachers, and so on) refers to group standards and behavior in group relationships. The usual use of the term, however, does not give adequate recognition to the fact that people not only adjust to groups (that is, modify some of their native propensities in order to secure the advantages of united action) but both play their part in groups and make use of their services. In fact, these latter aspects of social relationships are probably the more important, and concentration of attention upon them lays

the basis for an understanding of the nature and causes of social disabilities and of the functions of social work.

Out of this analysis of the nature and function of social organization and the sociological explanation of the term social relationships, we come, then, to a more precise understanding of what is meant when it is said that social work is concerned with helping people in regard to the difficulties they encounter in social situations. In addition, some reasons have been adduced for social workers' conviction that the giving of this help is of great importance, both to the individuals concerned and to society as a whole. We have still to analyze, however, just what this help consists of (to the answering of that question the later chapters of the book will be devoted) and, more precisely than has been so far suggested, what function it performs.

Suggestions for Further Study

Arensburg, Conrad M., and Solon T. Kimball, *Family and Community in Ireland,* Harvard University Press, Cambridge, 1940.

An excellent description and analysis that shows how a particular culture is organized and how it conditions the behavior of the individuals who live in it.

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Chapter V

THE FUNCTION OF SOCIAL WORK

The facts and theories set forth in the last chapter led to the conclusion that, both for their own good and for the stability and continuity of society, individuals must be able to participate in and make use of the organized groups through which human needs are met; and some of the reasons why this is becoming an increasingly difficult problem for individuals were suggested. It was also pointed out that social work's frequently stated objective of helping people with the difficulties they encounter in social relationships loses its vagueness when the nature of social maladjustment is clearly understood. When to these conclusions are joined our earlier ones regarding the typical activities of social workers and the categories of persons to whom the various kinds of social agencies offer their services, it becomes apparent that there must be a connecting concept that would bind together all of these aspects of what was originally described as a problematic situation. Such a concept should be found in a correct statement of the function of social work, for in the analysis of the function of an institution, in terms of what it accomplishes in the social whole, is to be found its reason for being.

Since it is already fairly obvious that social work has to do with the relation of individuals to social groups, the usual procedure of seeking the function of any particular social institution by examining its relationship to other social institutions seems especially well justified. The analysis of social institutions has already suggested that no matter how diversely or how well organized the life of a community may be, there are always individuals whose needs are not met. Some have no families, and some have families that perform their duties inadequately. For some the state or the neighborhood functions badly. Some do not have enough money to secure adequate recreation, education, physical care, and shelter. Others are handicapped by ignorance or psychological peculiarities or the possession of alien values and

customs, and so do not make effective use of the services of organized groups. It has already been shown that it is for people in such difficulties that social agencies are designed; hence we put forward as a hypothesis that social work is somehow or other a response to the inadequacies of other institutions or to the inabilities of people to make use of them. The problem, then, is to discover just exactly what this response consists of; that is, just where social work enters in relation to other institutions, what part it plays in helping people.

This problem might be approached in several ways. We could look at the people who are the clients of typical American social agencies, see what occasioned their requests for help and what services they secured. Or we could start with the social agencies and see what kinds of help they offer and to what people in what circumstances. Since both of these approaches, however, presuppose the detailed knowledge of the clients and activities of social work which it is the purpose of this book as a whole to convey, they do not seem feasible at this point. In addition they would require linking knowledge about clients and activities with knowledge about the ways in which needs are met through the usual institutional groupings—a connection that might prove rather difficult to make.

A third approach is found by starting with certain institutions, as they are typically set up in the United States, noting the circumstances under which they do not adequately fulfill their functions for individuals, observing what attempts are made to compensate for their lacks, and thus discovering finally the place of social work in the compensatory scheme. This approach, too, requires much information about both social work and the institutional organization of American society, but, even if limited to a tentative and rather superficial description, it should lead the way to a clearer understanding of the total problem than would either of the other two approaches.

Following this plan, then, we shall take up some of the chief categories of social institutions and seek to discover the relation of social work to them. In doing this we shall be continuing the investigation into the nature of social work in the manner that was proposed at the end of Chapter III. There it was concluded that since social work is an institution, it must be directed to the satisfaction of important human needs, and that its peculiar contribution to their satisfaction must be sought in its relationship to other social institutions. In Chapter IV the need to which social work caters was tentatively identified as that of effective operation as a member of a social group.

It was further suggested that various kinds of difficulties handicap individuals in this social endeavor and that various organized efforts are made to provide help. In seems, therefore, that the exact nature of social work—that which distinguishes it from other systems of activities—is to be found through disclosing the peculiar function social work serves in relation to the difficulties individuals encounter in specific institutional settings.

The Family

The importance of the family for the satisfaction of human needs has already been noted. It is through association in family groups that the majority of people secure, in part at least, the satisfaction of their primary biological needs: the need for food, shelter, clothing, other bodily comforts, health supervision and care in time of illness, the rhythm of work, recreation, and rest, as well as those intangible goods called emotional satisfactions. To the various individuals concerned, other specific benefits accrue from family life. The children receive instruction and guidance in social customs and moral values and in the development of knowledge and skills of various kinds. For the parents sexual intercourse is sanctioned, and the mother is provided with special care and protection during pregnancy and childbirth. Those who are physically or intellectually handicapped continue to receive care from parents and siblings even after maturity.

Conversely, the various family members have specific duties to perform so that these benefits of family life shall be secured. Without discussing these obligations in detail, for they are well known to all, we may note that very important among them in our society is that of procuring money. The modern American family is much less a producing unit (in the sense of itself preparing food and clothing and providing education, recreation, and even physical care) than was once the case. Rather, the modern family organization acts like a kind of middleman, being the means through which goods are conveyed to the individual members but not itself producing all of them.

Substitutes for the family's services

This specialization among producing agencies (or, to put it more simply, the fact that shelter, food, clothing, education, recreation, health care, and so on can be secured outside the family as well as within it) permits many able-bodied adolescents and adults to manage quite well

without family connections, provided (and it is a large proviso) that they have other means of securing money. For them, and for members of families as well, there are delicatessens and restaurants, rooming houses, laundries that will mend clothes, nurses and convalescent homes, and so on. Even if such familyless individuals are not physically or mentally well equipped, they can secure from other individuals or specialized institutions the care and protection a family might provide, if they have money enough to pay for the services. Whether they and the others without family ties can also secure from these and other sources the affection and encouragement which they require is another matter; but it must not be overlooked that few people rely solely on their families for the satisfaction of these needs.

For people who do not live in family groups or secure their maintenance from them and who do not have enough money to obtain from other organized groups some of the substitutes for family life, aid in various forms is provided. Those who stand most in need of help in such circumstances are children and old people, the physically or mentally handicapped, pregnant women and mothers of young children, and youths who are not equipped to earn money or who are still in need of supervision; but able-bodied men and women may also lack the means of securing shelter and care. The latter are usually assisted by being given money, but there are organizations that provide free or very inexpensive quarters for even the able-bodied when their need is sufficiently great.

As to the others, for children there are orphanages and other sorts of institutions; for some foster homes are available, and for others there is the possibility of adoption. For the aged and infirm who cannot care for themselves even if they have enough money, "homes" are maintained by religious or fraternal groups or by public funds, and there is also the possibility of their securing care in private families. For young people, particularly girls, there are various kinds of clubhouses and semi-supervised living quarters. Unmarried mothers may be provided for through institutions in which they can live during pregnancy and during the nursing period. For the physically or mentally handicapped there are also institutions which provide some of the services which a well-functioning family might render, and for such people, too, an increasing number of boarding homes are available. In few communities are these substitutes for family care sufficiently numerous and of good enough quality to meet the demand. Nevertheless, the fact that they or their equivalents are an accepted

part of the organization of all societies in which family responsibility is not spread out through a wide circle of relatives shows that provision must always be made for meeting the needs which the institution of the family normally serves.

Relation of social work to these substitutes for the family

These devices—adoption, boarding homes, custodial institutions—probably should not be regarded as being themselves a part of social work. They certainly antedate the development of the organized activities that have been listed above as those of case workers and group workers, and—more important—they are comprised of activities of a very different nature. Examination of just what is done by foster or adoptive parents and by those who administer and carry on the day-to-day work of custodial institutions (provision of shelter, food, and clothing, discipline and guidance for the young, physical care for all) shows that their activities are much more like those of natural parents and relatives than those of social workers.

Another test can be applied by inquiring whether private homes or institutions for the aged or children for which high fees are charged should be regarded as social work. Most people who make use of such services would indignantly answer no, thus implying what has already been pointed out: that there is a tendency to confine the term social work to efforts on behalf of the poor and to include all such efforts in the social work category. It would seem much more useful, however (in the sense of furthering understanding and facilitating future inquiries) to classify activities on the basis of the function they perform rather than on the basis of the people served. By this test the various facilities that are offered in lieu of normal family life would seem best classified as an extension of the institution of the family, regardless of how they are financed or for whom they are intended, rather than as part of the institution of social work.[1]

Social work, however, is frequently carried on in connection with these substitutes for the family. The activities of social workers in this field consist of finding and evaluating the facilities (foster homes, persons who want to adopt children, custodial institutions), telling

[1] In this connection is to be noted the distinction between social work as a social institution (which is the question under consideration here) and individual social agencies as social institutions. The latter may carry on numerous types of activities (including those of maintaining "homes"), only some of which are social work. Some of these agencies and their work will be described in later chapters. Before going into that, however, we want to develop a clear conception of the nature of social work itself.

clients of their availability, helping them to decide whether they want to use the facilities, and counseling with them in regard to problems that later arise; supervising children and handicapped indviduals who are placed in foster or boarding homes, since in such cases there is no other legally constituted authority; maintaining contacts with relatives and rendering other services of a liaison nature. In other words, it is the task of social work to make these substitutes for a family available to those who are not able to secure them on their own initiative, and to help these people to utilize them to the best of their ability. Viewed in this way, social work is seen to be not a parallel of another institution (as would be the case if it included these substitutes for family life) but an organized system of activities through which individuals are helped to utilize other institutions' services.

To summarize our argument so far, we see, then, that the institution of the family is a vitally important part of all human societies, but that in modern society, particularly, various organized services have developed that enable some people to secure some of the most essential benefits of family life without belonging to a family group. So necessary are shelter, nourishment, care and protection of the young, and some of the other services which are normally rendered through family organization, however, that the possibility of securing them in the absence of a family cannot be limited to people who have money. Accordingly, paralleling, for instance, the child-caring institutions and homes for the aged that charge fees are others whose services are free to people who cannot pay. Similarly, children are maintained in foster families either through the use of their own or their relatives' or friends' funds or through those that some other organized group provides. These services, we maintain, are not in themselves social work, but social work enters when people need aid and direction in securing and making use of them.

Conditions handicapping the functioning of the family

Loss of a family and absence from a family are not, however, the only circumstances that deprive individuals of the benefits that are expected to accrue from organization into family groups. Very often the family exists, but there is some impairment in its functioning. One of the most obvious handicaps to adequate functioning is lack of sufficient income, for the provision of shelter, heat, food, and clothing is for the most part directly dependent upon money, and the friendly relationships and emotional balance on which the care and

guidance of children so largely depend are likely to be disturbed when income is greatly reduced. Other hindrances to smooth-running family life are found in ignorance or neglect of the principles of nutrition, budgeting, child care, and household management, in poor housing arrangements, in problems arising out of sickness, advancing age, death, and so on.

Then there are many difficulties that can be grouped together as those of emotional relationships. Although these may not handicap a family in carrying out all of its functions (shelter and clothing, for instance, may be very adequately provided even though parents and children are very unhappy with each other), they are often a hindrance to more aspects of family life than might at first be thought. For example, a child's nourishment may be interfered with by domestic friction as well as by an inadequate diet, and his growth in rational self-control is largely dependent upon the feeling of emotional security that is fostered by generally happy family relationships. These difficulties may be due to personality disorders that require psychiatric treatment for their alleviation, but it frequently happens that people whose usual emotional adjustment is satisfactory find themselves in difficulties regarding the problems of family life. Crowded living quarters, the clash of personalities, conflict of standards and values, the practical problems of day-to-day living often result in situations that interfere with the carrying out of family obligations, even though the individuals themselves may be psychologically well adjusted.

Consideration of the various conditions that adversely affect the functioning of the family will show that many of them are the outcome of the inadequate functioning of other institutions and are compensated for by extensions or improvements in those institutions. For instance, the provision of opportunities through which labor can be exchanged for money and, through it, for needed goods is one of the main functions of the modern economic system. This system often operates inadequately, in that it fails to provide jobs or sufficiently high wages for considerable numbers of people. Over the years numerous supplementary economic arrangements have been made to offset the ill effects of this situation. The poor relief system is the most obvious example; its activities have long since been institutionalized and its function is well understood. More recent developments that operate to the same end (the provision of means of subsistence to those who for one reason or another are jobless) are unemployment and old-age insurance schemes and work relief programs.

Similarly, preparing boys and girls for earning money and for spending it wisely, for coping with the problems of household management and child care, for carrying on relationships with other human beings effectively is, to some extent, the task of the educational system. When this system does not fulfill these functions adequately, supplementary educational arrangements are set up, and such devices as parent education organizations, mothers' clubs in settlement houses, and home economics courses for young married women appear. In the same way failure of the usual medical facilities to provide adequate curative and preventive health measures results in the development of new arrangements (such as hospital insurance schemes and "socialized medicine") for meeting vital needs. The family as an institution is rendered the more effective, then, as these other institutions are extended and strengthened or as new ones are set up to compensate for their lacks.

Social work's services with respect to ill-functioning family life

Improvements in other institutions, however, will not solve all the difficulties of family life. No matter how many clinics are provided, how widespread parent education becomes, how adequate the provision that is made for the payment of benefits to offset the hazards of industrial life, there will still be families whose problems are not met. Some of the difficulties are referable to the fact that some families do not know about these other institutions' facilities or how to make use of them. Others are matters of a more individual nature concerning which family members need information, advice, or an opportunity for unbiased discussion. In short, if families are to function better, not only must other institutions operate more effectively but provision must be made for giving individualized help to family members with regard to their problems of family life.

It is service of this latter type that social workers render in their capacity as representatives of numerous specialized kinds of social agencies. Analysis of the work of family welfare agencies, for instance, shows that even when they give financial assistance they do not give it as a legal right, dependent only upon the presentation of evidence of eligibility (as is the case with both social insurance benefits and public poor relief) but as a form of assistance that will facilitate the solution of a family's problems. Nor is the assistance of these agencies, even in the economic field, limited to giving money, for it may consist

in putting the clients in touch with various resources through which they may be restored to earning power.

To carry on this kind of work effectively requires more than acting as a maintenance or information service. People who are ill or mentally incapacitated or not otherwise equipped for taking available jobs often need more than being told where to find a doctor or clinic or training course and provided with money to pay the fees. Many need help in arriving at decisions about what to do; they need to talk over their problems with somebody who not only has the knowledge of resources but the understanding about how people might feel in such situations and the ability to help them find a way to a solution which will be satisfactory. In the more detailed descriptions of social case work to be given in later chapters we shall see that such services are among those which social case workers are specially trained to render. They offer these services either in connection with financial assistance or independently of that aid.

Physical and psychological difficulties and educational deficiencies do not work indirectly only; that is, by limiting the power of the wage earner to provide adequately for the family's maintenance. They are often directly responsible for the malfunctioning of a family. Some of the ways in which these act as handicaps seem too obvious to mention. A sick mother cannot carry out her duties adequately; a sick child may create problems in family relationships that would not arise if he were well. When the mother does not know how to select and prepare the proper food or otherwise manage a household properly, when she and the father are ignorant of children's physical and emotional needs, when they do not know how to find adequate housing facilities, some of the values which organization into family groups is supposed to render are lost even when there is sufficient income. Similarly there are conflicts of habits and personality that lead to the disruption of family life. Sometimes these are due to psychological maladjustments that are so severe that the help of a psychiatrist seems needed; more often they disappear when the individuals concerned have a chance to talk over their difficulties with somebody who is not emotionally involved in the problems. Social work agencies provide help with these and other kinds of difficulties that handicap family life, their manner of rendering service being of that individualized nature described above.

But not all help with such problems can be considered social work. Just as the institution of the family is extended to provide homes

for some who lack them, and the economic system is extended to provide jobs for the out-of-work and compensation for those who are the victims of its malfunctioning, so the educational system in recent years has taken on the task of furthering its services through such devices as adult and parent education; health services have been broadened to cover "well babies" and normally functioning pregnant women; and, in general, there has been a widening of the responsibilities of many kinds of institutionalized groups with consequent benefit to family life. Study of the ways in which recognized social workers carry on their professional duties in connection with these and other services in order that family life may be benefited shows that they work as liaison agents, helping the workers in these other agencies to understand the needs of the clients in question and helping the clients to decide whether and how to make use of these agencies' services.

In addition, social workers frequently work independently of other organized groups. In that capacity they offer advice, guidance, and counseling with regard to the problems of family life with which clients come to them for help. We would conclude, therefore, that with respect to the institution of the family the function of social work is to facilitate the family's normal activities through counseling with individuals about the difficulties they encounter in family life, providing money or other material goods that are necessary to secure a family's adequate functioning, or helping family members to secure the needed services from other sources.

Educational Services and Facilities

The question of the relation of social work to education has two parts which find some parallel in the previous discussion of the relation of social work to the family. On the one hand, we must inquire into the distinction between social work and education, for there are important activities that are subsumed sometimes under one and sometimes under the other heading.[2] On the other hand, there is the question of what function social work plays in schools and how its services differ from those of other social institutions that facilitate educational work. This latter question, it will be seen, is similar to

[2] This situation has its parallel in social work and the family in that child-caring institutions are often classified as a part of organized social work, while, from our point of view, they are to be regarded as extensions of or substitutes for the institution of the family.

that of the relation of social work to the family and of the contrast between the services of social work in that area and the services of such economic institutions as the social insurances.

The distinction between social work and education

The first question is perhaps the more complicated one, and one on which there is considerable disagreement in professional circles. The points at issue can be seen most clearly if we ask why the problem arises. One of the main reasons is that classes are frequently conducted under auspices other than those of the recognized educational authorities and, particularly, that they often form part of the program of social agencies. The most obvious example is the instructional work carried on in settlement houses—classes in the use of the English language, in arts and crafts, in vocational training, in the care of children, and in physical and mental hygiene. Y's and Scout troops and other "character-building" agencies also conduct classes and discussion groups about numerous subjects, and as has been said in an earlier chapter, there is much discussion as to whether this kind of group work should be considered a part of social work. Then, in recent years, some family welfare and child placement organizations have been experimenting with courses in child rearing, dietetics, and household management; moreover, a few child guidance clinics provide their patients with instruction in arts and crafts.

The usual argument for considering such educational activities a part of social work is the one mentioned in other connections: that they are conducted in social agencies by social workers for their clients, who are, for the most part, people with little money. Similar activities under other auspices are not regarded as social work. For instance, the Junior League's program of instruction in problems of child care is not deemed social work, nor are the discussion groups that are conducted for mothers who send their children to private nursery schools so classified. We have previously argued that the peculiar nature of social work cannot be discovered if everything that is done under the auspices of a social agency is considered social work. The same argument applies to other social institutions, but the question does not arise there because we are not so much in doubt as to the essential characteristics of the undertaking. For instance, schools may include facilities for medical examination and even treatment, but the activities carried on in this connection are not thereby considered a part of education. Banks may have legal departments, but nobody

confuses law and banking. So it is that not everything that is done under the auspices of a social agency is social work. Social agencies may conduct homes for the blind, the aged, or dependent children, may provide "sheltered workshops" where the handicapped may find employment or recreational facilities for children ill served by their neighborhoods. But to call all these activities social work is to make that term vague and indeterminate and hinder attempts at understanding its peculiar contribution.

Similarly, it cannot be justifiably argued that whatever a social worker does is social work. Again the point may be made clearer by reference to another profession. Lawyers and doctors acquire their status by training and examination, but the institutions of law and medicine are not defined in terms of whatever activities the qualified of those professions engage in. A lawyer as a member of a court may supervise the administration of an almshouse, and a doctor as a member of a hospital staff may administer an insurance system. Similarly a social worker, even in a social agency, may do many things that are not social work.

One source of this difficulty in distinguishing between social work and education is found in the fact that there are many kinds of social institutions. That difficulty could be dismissed as purely academic were it not that the same confusion in thought prevails in the practical aspects of the matter as well. As has been said before, organized social work, like organized law and organized medicine, does constitute an institution according to the criteria we have used. So also do individual social agencies. Like other institutions, these agencies may have various functions—educational, economic, medical, as well as that of social work. For the most part this fact does not cause any confusion in our thinking. When considering the actual work of a social agency which engages in numerous activities we have no difficulty in recognizing that the doctors connected with it are carrying on medical diagnosis and treatment, that those who are instructing, say, the blind, are teachers, that the agency is acting in the capacity of an employment exchange when it brings workers and employers together. It is only when we come to say which of its activities are peculiarly those of social work that we become vague, and that is because few people are quite clear just what social work really is. It is for this reason that it seems necessary to work out clearly the peculiar nature of social work as itself a social institution before taking

up the question of how social agencies carry on their tasks—the primary one of which is social work.

Another argument advanced for considering that classes and study groups conducted by social workers in social agencies are a part of social work centers around the fact that many such classes are conducted according to methods and aims that are believed to bear much resemblance to those of social work. Specifically, many of the classes are concerned with problems of social relationships and are directed toward the development of individual capacities rather than the imparting of information. They use the methods of "progressive education," and it is significant in this connection that some authorities are inclined to consider all progressive education a part of social work.

It seems to us that this too is a fallacious argument and that it arises out of mistaken notions of the function of both education and social work. Education in all societies is directed toward the transmission of knowledge, skills, and customs—usually to the new generation but to older people as well if it is deemed important that they should know more than they learned as children. The extent to which the promotion of the fullest capacities of the individuals concerned is taken into consideration varies with the social and political constitution and aims of the society, the value it sets on individual worth, the recognition accorded to individual differences. Recent tendencies among American educators to emphasize the personality-development aspects of education doubtless reflect both our democratic tradition, our emphasis on individualism, and the increasing knowledge of the interrelation of emotional and intellectual factors in human development. In a sense, however, much of education in all societies is concerned with developing latent capacities and inculcating, by one means or another, the society's rules about how to get along with other human beings.

Knowledge of human relationships and interest in furthering the capacity of individuals to function well in this respect are not the exclusive possession of social work. Social workers themselves derive their knowledge of these aspects of human behavior from other disciplines, and, like the workers in other professions that utilize this knowledge, they adapt it to the needs of their own professional tasks. The misconception probably arises in part out of the loose use of the term "social relationships" to describe the area of the interests of social work. Our analysis has suggested that social work is not concerned with personal relationships in general. The promotion of the ability to

function well in that respect is education, broadly conceived; and the start of the child's development in that direction is made by the parents. The amelioration of intrapsychic difficulties evidenced in relationships with other human beings is the special province of psychiatry, although some other professional groups may lay claim to special competence here also. But social work is concerned with difficulties in social relationships as they arise in particular settings—in connection with the family, with the school, with hospitals or clinics, or in adjustment to neighborhood or nation. It is for these reasons among others (such as that social work enters only when difficulties arise and is concerned not with general adjustment but with adjustment to particular institutional relationships) that social work and education cannot be equated. They are distinctive activities, and education remains education and can be recognized by the function it performs, regardless of its auspices, teachers, pupils, or the content of courses or methods of instruction.

These arguments lead to the conclusion that instruction given to groups of people in settlement houses, by family welfare or child placement agencies or by social workers in any setting, should be regarded as education rather than social work, whether the aim is the promotion of knowledge and skills or the general betterment of the individuals' utilization of their capacities. The benefits of such extension of educational opportunities may find reflection in other institutional relationships, such as those of family or occupation, but this is no different from the benefits that accrue to family relationships from enlargements of the economic system to provide social insurance payments.

Social work, by contrast, is concerned with the problems that handicap particular individuals in their functioning in some organized group. Even when its methods are those of giving advice (which may at times seem to approximate education), little emphasis is put on general principles—as is apt to occur when instruction is given to a group—but the knowledge given is adapted to the needs of the person in question, and account is taken of his ability to use it.

Social work with groups

Attempts have been made to carry out the social work function of facilitating the use of existing institutions by group methods as well as by those of social case work. Clients having similar problems (children who cannot get along in ordinary recreational activities, parents who encounter difficulties in their relations with their children,

delinquents whose problems are of certain specific character) may be offered an opportunity to discuss or otherwise work on their problems in groups instead of individually. It is in this field, apparently on the border line between social work and education, that the chief dispute about which kind of activity is being engaged in arises. To us it seems that the distinguishing mark is the end to be served. If the aim is not the development of general capacities but is that of helping individuals solve in their own way the particular problems they encounter in some group relationship, we would be inclined to consider the activities as social group work rather than education.

A particularly interesting example of this distinction is a certain type of parent education. Parent education programs vary widely, from those which are indubitably education to those which would seem to be appropriately classified as social work. To the first belong the classes in which instruction is given, usually in the form of lectures by experts, in such subjects as the care and feeding of children, household management, mental and physical hygiene. Then, still in the educational field according to our criteria, are the discussion groups in which "progressive" methods are used to elicit formulation of principles about parent-child relationships and child-rearing methods—to develop the individual members' capacities to function well as parents. It is usually stressed in such study groups that each parent must apply the acquired knowledge in his own way, but nevertheless care is taken to avoid detailed discussion of individual problems, thus suggesting that it is not the purpose of the course to give direct help to individuals in working out their difficulties. For persons who need such help, parent education organizations often offer the services of a "counselor."

On the other hand, there are so-called parent education groups whose members are chosen on the basis of their having encountered difficulties in, say, parent-child relationships and whose activities are directed toward helping each person work out his own particular solution to his problem with little reference to general principles of child rearing. The methods by which this can be accomplished are still in a rudimentary stage of development, but proponents of the plan believe that the group situation has values which are lacking in that of the client-case worker relationship. However that may be, it seems to us that this kind of work with parents is social work rather than education.

It will be seen that the distinguishing criteria of social work, ac-

cording to our point of view, are its direction toward the solution of problems that are peculiar to the individuals concerned (that is, not characteristic of them by reason of such factors as age, sex, or social status) and its reference to relationships to some social institution. Tested by these criteria, workers' education, for instance, would be education and not social work. The students may come to the classes because they are concerned about their status in industry and are interested in bettering their working conditions, and the method of instruction used may be that of free discussion. Nevertheless, none of these classes—so far as we are aware—has as its aim the resolution of problems that are peculiar to the individual students. They strive rather after the formulation of knowledge and principles which will be helpful to all in the conduct of their relationships in the industrial organization.

Much the same may be said about all kinds of "informal education." In the literature of group work, for instance, there is much discussion about using group methods to develop the skills and understanding requisite for participation in a democratic society and for effecting desirable social change. Although activities of this nature aim to improve social relationships in a particular institutional setting and to help the club or study group members play their part as citizens, in joining the group a person does not expect help with some problem that is peculiarly his own, nor does the group leader proffer assistance that is peculiarly adapted to the unique situation which this individual encounters. Instead, the individual joins the group because of his general interest in the subjects to be discussed, his lack of knowledge about them, and his desire to develop skill in the area of activity under consideration; and the group leader carries out an educational and not a social work function in developing the latent capacities to deal with situations that are common to the group members.

Social work in schools

The question of the function of social work in school systems is of a different character, the problem being not one of distinguishing two types of service but of discovering how social work operates to facilitate the educational process. Among the clients of social agencies listed in Chapter II were children who were finding difficulty in adjusting to school. The present question is what aid social workers provide for such children and how it differs from that offered by other professions.

During the last twenty-five years or so there has been a marked increase in professional self-consciousness among educators and much debate about the ends to be served by education. Along with this has gone an increasing awareness of the variation in children's capacities for acquiring knowledge and skills and of the kinds of obstacles that may hinder their progress. Accordingly the staffs of many schools have been enlarged to include psychologists, physicians, nurses, psychiatrists, and social workers, with a view both to helping the teachers understand the children's capacities and needs and to helping the children make the most effective use of the school program.

The role of most of these professional workers in the school system is clear. The psychologists test the children's intellectual capacities and try to discover where their special abilities and special weaknesses lie. Their findings may be used by the teachers in making grade assignments, in planning the children's courses of study, in judging the extent to which they are working up to capacity, and in other ways understanding and helping the children. Or the psychologists may themselves work with certain children in order to help them overcome their intellectual handicaps. Since intellect and school achievement are so closely associated, it necessarily follows that the psychologist's efforts are closely related to the educational process.

It is somewhat different with the work of physicians and nurses in schools. These professional people were originally added to school staffs because it was recognized that physical disabilities of one kind or another may handicap children in their use of educational facilities. But once in a school system, physicians and nurses do not confine their efforts to removing or mitigating handicaps to learning. Instead, they are concerned with the whole question of physical health, and its bearing on the child's ability to function well in school is only secondarily considered. The significance of this point for our study is that, functionally considered, the work of physicians and nurses—even those in schools—has about the same relation to education as has the granting of social insurance benefits to family life. In both cases two institutions (medical and economic) render services which, in some cases, enable individuals to function better in another institutional relationship (the school or the family), but their services are not specifically directed to that end.

The same is true of the work of psychiatrists in a school system. They too were originally brought in so that teachers might better understand the needs and handicaps of particular children and so that

the children might be helped to adjust better to school. But in their actual work most psychiatrists do not confine themselves to these problems. Their interest is in their patient's total emotional adjustment, not only in that part of it which concerns his relationships and utilization of capacities at school. When attempts are made to limit the psychiatrist to these latter problems, he finds his work greatly hampered, for it is not the function of his professional activities to adjust individuals to particular aspects of their lives but rather to remove obstacles to their emotional development so that they can operate adequately in any social relationship.

It is other than this with the activities of social case workers in a school setting. Their services are directly related to the social adjustment of their clients in school. These social workers study the home and neighborhood conditions of the children in question in order to see whether they have bearing on the school difficulties. They discuss with the parents and teachers the children's difficulties in school and try to ascertain the parents' feelings and desires with respect to the children's education, as well as the other factors that are relevant to the situation. They interview other people who have information on this subject and make arrangements for securing various kinds of assistance for the children. With the children themselves the social workers discuss the nature and possible causes of the school difficulties, trying especially to find out what the children's feeling about the situation is; and they try to help the children to work out an acceptable solution to their problems.

The function of social work in connection with schools, then, is to help the people concerned in the educational endeavor—the teachers, the pupils and the parents—to operate more effectively in that institutional relationship. Thus it is in a very concrete sense that social work is concerned with the bettering of social relationships: its activities are specifically directed toward the solution of problems that individuals encounter when they join with others in a particular social undertaking.

Organized Recreation

In the question of the relation of social work to recreation, problems much like those discussed under social work and education are involved. The kind of recreational activities we are here considering are those carried on by settlement houses, community centers, boys' and girls' clubs, other youth agencies, institutions for delinquents,

dependents, the aged, the psychotic, and other organizations which are usually classified as social work agencies. They include not only athletics but other types of leisure-time pursuits carried on under direction, preferably, of trained leaders. In some instances the line between recreational and educational activities is not clearly drawn. Doubtless there are recreational aspects to the work of many educational organizations, and educational aspects to organized recreation. Nevertheless, the main function of each of these institutions is clear. Our problem, however, is not that of drawing distinctions between them, but has to do, on the one hand, with the contrast between recreation and social work and, on the other hand, with the function of social work in recreational undertakings.

Distinction between social work and the activities of recreational workers

From the point of view of the nature of the activities, there would seem to be little reason to confuse organized recreation and social work. Certainly coaching baseball teams, teaching children to swim, providing facilities for folk dancing, supervising boys' club activities require very different knowledge and skills from those that we have listed as indubitably those of social work. The question regarding the inclusion of recreational activities in the category of social work arises chiefly when recreation is carried on as a philanthropic service and when one of its purposes is the fostering of the ability of the participants to engage in social relationships. With respect to the first reason it can be said—as has been said several times before—that to define social work in terms of the economic status of the people served is to deprive the term of much of its special meaning. Such a definition would exclude many services (such as those of visiting teachers, case workers in child guidance clinics, travelers' aid societies) now commonly accepted as social work and would include many activities—from building houses to practicing law and medicine—which are of a very different nature.

The second reason requires more detailed consideration. The promotion of social relationships among people who are regarded as socially maladjusted is sometimes regarded as one of the main functions of social work. Accordingly, when psychotic patients, "predelinquent" or delinquent children, children in orphanages or other institutions, foreigners recently arrived in the United States, and others who are believed to find social relationships difficult are gathered into

groups for the purpose, to some extent at least, of improving their relationships with others through participation in recreational activities, this work is often called social work.

Several things are to be said about the merits of this argument. In the first place, there is not a point-to-point correspondence between institutions and functions. Different institutions may have some function in common—as witness the family and the educational system—though an analysis of their total activities and functions will reveal distinctive characteristics. With respect to the particular function in question (that of socializing the individual), it is certainly not confined to social work. The family, the educational system, the medical profession through its psychiatric services, the church, and other institutions—including that of organized recreation—all carry on such work.

In the second place, our analysis of the function of social work up to this point suggests that it has a more precise meaning than that of improving the relationships of the socially maladjusted. That concept is used in two ways with regard to clubs, athletic and dance groups, and other activities carried on for the benefit of the individuals in question. It may mean helping people to get along better with others through experiencing satisfying relationships in supervised play or discussion; or it may mean providing them with some of the means of socially acceptable relationships and developing their capacities to use them. Psychotic or neurotic or emotionally deprived individuals may, for instance, learn how to make better use of social contacts through supervised recreation, and potential or actual delinquents may find in it new outlets for their energy. It will be seen that there is much that is educational about this work, and much that is psychotherapeutic. But does it share the characteristics which our analysis so far has shown to be peculiarly those of social work?

This analysis has indicated that the activities commonly regarded as social work are directed toward helping people operate better in particular organized group settings. In addition, they center around problems and needs which, in their combination of circumstances, are peculiar to individual clients. The services of a social worker are called into action by concrete problems encountered in particular institutional relationships, either by clients or by those who work with them, and are direct responses to those difficulties. For instance, the applicant to a family welfare organization comes for help because he cannot pay his rent (that is, he cannot supply shelter for his family), because he

thinks his wife is not caring for the children adequately, or because he is worried about his adolescent daughter's behavior. The doctor in a hospital requests the help of a medical social worker because Mr. Angenito seems to have a superstitious fear of operations or because Mrs. White needs supervision in carrying out instructions about diet. It is true that this is a tentative generalization about the nature of social work, since some of the important aspects have not yet been examined, but it may serve to throw some light on the question of whether some activities of a more or less recreational nature can be regarded as social work.

There are a number of kinds of activities about which this question is raised in professional social work circles—among them camps for problem children, clubs for boys who are thought to be on the verge of becoming delinquent or for adults who have been or are near to becoming psychotic, discussion groups for people who have certain problems in common. Then there are the so-called therapeutic play groups, usually composed of very young children who are excessively shy or aggressive or who have other difficulties in getting along with people; a few child guidance clinics have workshops for their patients; and the writing and producing of plays and music have been a means employed in the treatment of neurotic and psychotic patients.

It is clear that most activities of these sorts are designed to do something other than to provide a means of relaxation for the participants or to introduce them to socially acceptable forms of amusement or to "develop their personalities." Such may, of course, be among their objectives, but their main purpose is to deal with individual behavior problems through group activities. This concentration on the cure of personality difficulties is certainly characteristic of the therapeutic play groups, the camps for problem children, and the group work activities of hospitals and clinics. Such a characteristic sets this work outside the field of recreation, but whether it makes the activity social work is not yet clear.

One test for social work we have proposed is that of whether the individuals are selected for inclusion in the groups (that is, are offered the services of the leader) on the basis of difficulties encountered in one or another institutional relationship. Another is whether the work is aimed at the alleviation of those particular difficulties. Examination of actual group work programs suggests that the answer varies from instance to instance. There are, for example, discussion groups whose members are adolescent girls who are having difficulty at home and

whose discussions center around family relationships. The objective is not to impart information but to help the individuals work out their own particular problems through group rather than individual discussion, as would be done in a case work situation. Then there are discussion groups in which the problem in common is one of general personality maladjustment (as is the case with psychotic or post-psychotic individuals), and the methods used are designed to correct this difficulty. Finally, there are discussion groups for which participants are chosen on the basis of age or educational status or some such objective basis, and topics for discussion are selected by the group in terms of its own interests.

On the basis of the criteria we have proposed, it would seem that the work carried on with the first group is classifiable as social work, that of the third as recreation or education, while that of the second belongs in the field of psychotherapy. Some backing for the validity of this classification is given by the fact that the first type of group is likely to be led by a social worker and the second by a psychiatrist, while the third type of group is typically found in a settlement house or Y.W.C.A. But this in itself is not an adequate test, for we must remember that the professional affiliation of the leader is not a proof of the nature of the work carried on. As has already been shown, not everything a social worker does is social work.

The work carried on through therapeutic play groups may be similarly tested. These groups are usually organized by family or children's agencies or by child guidance clinics, and the children are selected for inclusion in a given group on the basis of either particular difficulties or general maladjustment. With the latter children much use is made of play techniques that have been devised by child psychiatrists, the aim being to remove hindrances to emotional development. Except for the fact that this work is often carried on by social workers (though in many child guidance clinics it is entrusted to psychologists, and in a few progressive schools teachers engage in this work), there would seem to be little reason to regard it as other than a form of psychotherapy. On the other hand, there are play groups composed of children who find it difficult or impossible to participate satisfactorily in ordinary recreational groups—in other words, in a particular institutional setting. The leaders of this kind of play group direct their efforts to providing situations in which the children will gain enough security to venture to compete with others or will otherwise learn how to handle their feelings so that they can

gradually move on to the more ordinary type of recreational relationship. According to the criteria suggested above, this kind of play group would be classified as belonging to the field of social work. When to these two types of play groups is added the one ordinarily conducted by recreational workers in kindergartens or lower grades, we have again examples of group work as therapy, social work, and recreation, respectively.

Some further comment on the distinction, as we see it, between social work and psychotherapy may be in order here, since little has previously been said about it in the course of our argument. In recent years social workers (both case workers and group workers), educators, psychologists, recreation workers, and others have become greatly interested in the possibility of improving the mental health of their clients or pupils through the use of resources and techniques that belong to their professions. Much has been written on this question, and many arguments have arisen which will certainly not be settled by any statement made here. It is our conviction, however, that there are important differences between the promotion of mental health as one of the general aims of a profession and the direct treatment of personality difficulties, whether individually or in groups. According to modern psychiatric theory, mental health is promoted whenever human needs are met in ways that take into account the so-called instinctual desires. Since needs are met through social institutions, the mental health of the participants in or the beneficiaries of the activities of the organized groups is enhanced when the work is carried on in conformity with knowledge about human psychology. This, it seems to us, is the basis for the interest of parents, educators, recreation leaders, and others in social psychiatry. It likewise accounts for the use of this knowledge by social workers, since their task is that of helping people who are handicapped in their use of organized groups.

Parents and professional workers use the knowledge furnished by modern psychology and psychiatry for the furthering of some of the functions of the institutions of which they are a part. This is decidedly different from the use made of this knowledge by those whose job it is to help individuals remove the psychological obstacles to their satisfactory relationships with other human beings without respect to institutional setting. This latter field of activity is called psychotherapy, and the promotion of mental health is not a by-product of its effective functioning but the immediate aim.

Social work services in recreational programs

The question of the distinction between recreation and social work being tentatively answered, we have next to consider the services rendered by social workers in connection with recreational undertakings. One of these has already been mentioned—the group work programs that are designed to help individuals, usually children, to develop the ability to participate in the usual kinds of recreation groups. In addition, a few recreational organizations have case workers on their staffs, their job with respect to children being somewhat the same—although probably not yet so highly developed—as that of case workers or visiting teachers in schools.

Then, too, case work is sometimes carried on in connection with camps, particularly those for problem children. Here one of the case workers' tasks is to help to choose the children for whom the camp experience would be beneficial, either from a physical or from a psychological point of view. Another is to assemble the material about the children's social situations and their personality difficulties and to give to the camp administrators information that will help them understand the children's behavior in camp. Case workers also frequently have the duty of carrying on work with the children's parents so that they may understand their children's difficulties better and help the children to utilize the camp experience beneficially. In camp itself case workers may engage in individual counseling with the children about the problems that arise out of the camp experience or in connection with it, and discuss with the camp workers those aspects of their findings that relate to the children's adjustment in camp.

The activities of case workers on the staffs of other recreational organizations are very similar to these. The function of social work—both group work and case work—therefore appears again to be that of facilitating the functioning of another social institution by giving assistance both to the individuals who conduct its work and to those who are expected to benefit from its services.

Suggestions for Further Study

Queen, Stuart Alfred, *Social Work in the Light of History*, J. B. Lippincott Company, Philadelphia, 1922, pp. 307–22.

An analysis of the reason why social work is needed; uses the concepts of Mead and Cooley to arrive at much the same conclusion as ours.

Regensberg, Jeannette, "An Attempt to See Case Work Apart from the Related Professions," *Newsletter of the American Association of Psychiatric Social Workers,* 1790 Broadway, New York, VII (Spring, 1938), 1–8.

Social Work Yearbooks: articles on group work, visiting teacher work, recreation, boys' and girls' clubs, etc.

See also Chapters II, VII, XI, XIV of this book.

Chapter VI

THE FUNCTION OF SOCIAL WORK (Continued)

The analysis of the function of social work with respect to the family, education, and recreation revealed a more complicated situation than may have been anticipated, for certain of the activities of those institutions are themselves often regarded as social work. Many organizations that are classified as social agencies carry on educational and recreational programs, and many of the substitutes for the family —"orphan asylums," homes for the aged poor, and the like—are commonly regarded as social work facilities. In studying, then, the relation of social work to these activities and organizations, it was necessary to consider first just what needs they themselves serve and what part they play in the total organized society. Only so could a clear differentiation between the services of these institutions and those of social work be drawn and a basis be laid for answering the original question —the place and function of social work in the total social structure.

With respect to other types of social institutions with which social work is frequently associated, fewer such complications arise. It is true that public health programs are sometimes classified as belonging to the category of social work. Such a classification can be considered valid, however, only if social work and social welfare are made equivalent terms that refer to a loose congeries of programs and activities that have in common a philanthropic character. Much the same reasoning leads to the inclusion of the work of juvenile courts and of probation and parole services in the category of social work, although the question here is more complicated, as the analysis in Chapter XV will show. For the most part, however, the activities of the institutions still to be considered—organized medicine, the neighborhood, the nation, and the state—are so clearly distinctive from those of social work that we can proceed directly to the question of what part social work plays in connection with them.

Medical Institutions

Social workers are employed by hospitals, institutions for the feeble-minded and psychotic, child guidance and mental hygiene clinics, visiting nurse associations, a few municipal and state departments of health, and some of the health services that receive federal support. The work varies considerably from one to another of these types of organizations, but its function remains broadly the same.

Social work in connection with general hospitals developed out of recognition of the fact that many patients did not and perhaps could not follow out their doctors' advice after they returned home. This doubtless was always true to some extent, but the problem became more serious when more and more people began to use hospital wards and clinics instead of staying at home during illness, and doctors consequently knew less about their home conditions, customs, and attitudes toward disease. In addition, doctors became increasingly aware of the connection between physical, emotional, and social factors in causing or prolonging disease processes, and it consequently became more important for them to know the attitudes and customs of patients and their families. It was in order to secure facts about such matters, as well as to help patients and their families carry out the doctors' orders (through explaining the nature of the disease and the treatment needed for its cure, helping them make arrangements to secure the needed equipment, food, and medical supplies, or the needed environmental adjustments) that social workers were first engaged by hospital authorities.

As time went on, it became increasingly clear that patients were handicapped in making use of medical services not only by poverty and ignorance and the possession of customs that were not in keeping with modern medical knowledge but by more subtle factors of personality and emotional conditioning. Such difficulties are not confined to people who are definitely neurotic; instead, the great majority of people find adjustment to illness difficult. Some, more or less unconsciously, find it so pleasant to be ill that they resist efforts to cure them, and others so reject the idea of illness that they will not co-operate at all. Many others are worried about numerous practical aspects of the matter or have fears that may or may not be warranted by the facts. All of these conditions put obstacles in the way of effective use of medical facilities. Some of these obstacles can be handled by physicians themselves, especially in private practice and in small communities

where greater intimacies exist. Others, however, require special knowledge of social resources and techniques of helping people to express their anxieties about difficulties and to work out the solutions of their problems. Such knowledge and techniques are part of the professional equipment of social case workers. Their aims with respect to the emotional aspects of their clients' problems differ from those of psychiatrists in that the social workers are not trying to bring about total personality adjustment but rather to give help with difficulties in one particular area of the clients' relationships with other human beings.

Social workers in the employ of visiting nurse associations, crippled children's services, and public health departments have duties to perform that are fairly similar to those of social workers in hospitals. They enter into those cases in which the patients or the responsible relatives seem to be handicapped in one way or another (by their attitudes, emotions, customs, or economic conditions) in making good use of the agency's services. To nurses and physicians the social workers give information about the patients' home conditions and their feelings about the service being offered, while to the patients they offer counsel or guidance with the problems in question. Though the efforts of these social workers may result in improvements in their clients' family and economic relationships, their objective is to help patients and doctors to make better use of medical facilities.

In this connection it is of importance to note that although the concept of social work as helping people with their social relationships is applicable when adequately defined, it does not always have the meaning that popular usage would ascribe to it. On superficial consideration, there is not necessarily anything wrong with the social relationships of a person who is worried about how to meet his medical bills or who cannot admit that he is ill because health is so necessary for his self-esteem. It is only when social relationships are defined in terms of participation with others for the meeting of specific needs that it is correct to say that patients may be handicapped in their social relationships with a hospital. Moreover, when social relationships are defined in terms of social institutions it becomes admissible to say that social work also affords a hospital staff assistance with their social relationships, for such a statement would indicate that through social work the staff members are enabled to work more effectively with their patients. Since such a use of the words, however, is so far removed from their popular meaning, it is probably better to substitute more

specific terminology and to say that social work is concerned with aiding people in making more effective use of social institutions.

Neighborhood, Nation, and State

The question as to the part social work plays in connection with the three institutions that are organized on the territorial principle—neighborhood, state, and nation—will be only briefly considered because too many technical problems are involved.

The neighborhood

The neighborhood as a social institution has the functions of producing and securing mutually beneficial services for its members. Its organization in large American cities, especially in slum areas, is somewhat tenuous, numerous factors—such as low income, ignorance, diversity of nationalities, politics—accounting for that situation. The result is that the sense of neighborhood membership, pride, and responsibility remain undeveloped, and there are few effective means through which the desires of individuals for improvement of the immediate social and economic conditions under which they live can be translated into action. In fact, these desires frequently remain not only unexpressed but unformulated, for people may not have any sense of their rights as citizens or any idea of the relationship of such facts as, for instance, juvenile delinquency, unsanitary housing conditions, inadequate school and recreational facilities with the lack of neighborhood consciousness. Studies have shown that in many economically inferior neighborhoods there are apathy and fatalism about social and economic conditions, no sense of unity or group consciousness, and no thought of organization to effect change, since the causes of the deplored situation are viewed as lying in personal defects rather than in neighborhood conditions. The whole question, it will be seen, is a highly complicated one, involving knowledge, values, and social and political organization, planning, and action.

The fundamental problem is that of creating and developing a social institution, and both theory and practice suggest that it is very difficult to make a satisfactory synthetic product through the utilization of outside initiative. The incentive should come from within the group itself and be based on a realization of need and the possibility of effective accomplishments through group action. Nevertheless, various attempts at neighborhood organization under outside auspices

are made, usually with special purposes in mind. Organization of parents on the basis of school districts is one example; political clubs are another; and there are numerous civic or good-government leagues and other organizations to foster civic participation. Educational and recreational organizations also do considerable work in this field, their purpose being to supply knowledge and the sense of mutual interest upon which the development of neighborhood sentiment in part depends.

The place of social work in this area has never been well worked out. Settlement houses were originally planned for the specific purpose of offsetting the deterioration of neighborhood consciousness that had been produced by industrial and urban changes. It was thought at the time of their founding (about 1885) that if groups of educated young men and women would take up residence in slum areas they could supply the leadership in civic matters and stimulate the development of group consciousness that had been declining ever since the parish system had been undermined by modern industry and people had become segregated in districts along economic lines. Their motive (to express it in the terms of our previous analysis of social work activities) was not only to help individuals to play their part in an organized group but slowly to create the organization itself. Various methods were employed to that end: visiting, counseling, and making friends; providing clubs and classes and various forms of recreation; taking part in local civic disputes, studying economic conditions, and backing movements to remedy them.

As the years went by, the emphasis of settlement house workers began to shift to the provision of educational and recreational activities, and the development of local leadership and community consciousness became more a by-product than an immediate objective. Recently, however, there has been a revival of interest in the use of group discussion methods to help individuals to participate democratically in local as well as larger affairs. It seems that this is a field distinct from that of education and may with good reason be considered a part of social work, especially when the activities are deliberately directed (as is the case in these recently formulated methods) to helping the individual members of the group to find their own peculiar way of taking part in the neighborhood organization. Some social work theorists call these activities community organization, while others consider them a form of social group work. Since this, however, is such a disputed and ill-

formulated field of social work, we shall not attempt to describe it further.[1]

The nation

A nation, says Malinowski, is a group of people organized on the basis of common background, culture, and language. Whether the United States is one nation or many, or whether it is a nation at all, in this sense of the word, is an open question. But whatever answer one gives, it is clear that immigrants and their children encounter numerous problems that are referable to the fact that they have left their own country and its established ways of life. Toward meeting this problem several types of social institutions contribute services. Schools offer courses in the English language, civics, and other subjects designed to teach foreigners the customs and ways of life in the United States. Settlement houses and numerous other organizations also carry on educational work that aims both to "Americanize" the foreigner and to preserve some of his traditions (particularly music, art, literature, and crafts) that are regarded as enriching to the culture of this country and a source of pride to the national group. Recreation work is carried on by settlement houses and other organizations, both for promoting group solidarity and fellowship among immigrants and for providing stimulating social contacts to people who may be lonely in a new environment. Help in adaptation to American ways of life is also given through the press and radio, movies and theaters, by churches and medical organizations, by clubs, lodges, and benefit associations, as well as by organizations specifically set up for promoting good relations between Americans and foreigners.

The place of social work in relation to the nation is hard to define, partly because the nation itself is not highly organized. In actual life most of the difficulties foreigners in the United States encounter arise in connection with some more definitely organized group: in relation to the family, where, for instance, daughters may act in ways that parents find incompatible with old-world standards; in business relations, where unfamiliar practices may prevail; in the use of clinics and hospitals and custodial institutions for the treatment and care of the physically or mentally defective or ill. It is largely in the context of

[1] For a brief résumé of the history of settlement houses and their objectives see Paul U. Kellogg, "Social Settlements," *Encyclopaedia of the Social Sciences*, XIV, 157–62. Bibliography attached.

problems such as these that the specific difficulties of understanding and accepting American ways appear.

Social work, accordingly, seldom centers about adjustment to American life as a whole but about problems that are connected with these other institutional relationships. Conversely, even though numerous social agencies limit their clientele to immigrants and the children of immigrants, their work is far from exclusively confined to effecting the adjustment of their clients to the American nation as a social institution. Instead, they carry on with their immigrant clients largely the same kinds of services that the corresponding case work or group work agencies carry on with less selected groups of people.

To be helpful to people whose cultural background is different from that of the majority of the community in which they are living, the social worker must, of course, have knowledge of their values and customs and respect for them. But this need is not limited to workers with the foreign-born. Among the native-born in the United States there are many different cultural groups that, although they speak the same language, differ widely in many other respects. It is this fact that leads to doubt about whether it is correct to speak of the American nation, and it is neglect of this fact that leads some social workers and sociologists to recognize "culture conflicts" only when they appear among the foreign-born.

To say this, however, is not to deny that an American nation is in the process of development or that there are values and customs that are characteristically American and are embodied in ethics and law. This development itself is being fostered by numerous agencies and forces, and toward helping people participate in it social work plays a small part. The influence of social work in this respect is seen perhaps more clearly in group work than in case work services. We have previously distinguished group work from education by the fact that the former is concerned with people who are having difficulty in some particular institutional relationship and affords help with those problems. Difficulties in adaptation to ways of life of the dominant group (call it the American way or not, as you prefer) constitute one such problem on the basis of which discussion groups are organized. Other discussion groups, such as some conducted by parent education organizations, center attention on current standards of behavior, particularly of young people, and try to clarify ideas about methods of dealing with them. These are examples of how social group work gives

help in building up national unity and in assisting people who find themselves at variance with current customs.

Like social work concerned with problems arising out of the neighborhood as a social institution, however, that which has to do with the nation is rather vague and indefinite. It is perfectly clear that people encounter difficulties in relationships with neighbors and in adjusting to and making use of the customs and ways of life we call American. But the fact that neither American neighborhoods nor the American nation is definitely organized makes social work in regard to problems arising out of these relationships lack the definite character that it has in other fields. This in itself would appear to be additional proof of the thesis that the peculiar character of social work is to be found in its relationship to other institutions.

The state

Social work in connection with the social institution called the state does not have the nebulous character that often attaches to work concerned with neighborhood or nation. This is partly because there is no question about the fact of social organization on a political basis. The chief functions of the state are the maintenance of law and order, the protection of life and property, the exercise of power abroad, and the defense of territory. In the course of its duties the state finances and administers many social welfare activities and in them uses the services of social workers. But social work in connection with the state itself is not found in these activities but has to do with the help afforded to individuals regarding the difficulties they encounter in playing their part as members of this social organization. Under such a conception social work in public schools, hospitals, public welfare and relief programs, even social work in connection with the armed forces of the country is only indirectly related to the state, for these are separate institutions set up by the state to carry out its specialized functions.

The state differs from other social institutions in the formal manner in which its authority is exercised. The rules governing the rights and duties and proper conduct of members and others living under the state's jurisdiction are laid down in constitutions and statutes and enforced by police, courts, and other legal institutions. Lack of ability or desire to play one's part in the organized group called the state is demonstrated most forcefully in the breaking of laws, and it is therefore in connection with this problem that the question of the possibility

of using social work comes up most clearly. The chief developments have taken place in the area of juvenile delinquency. It is sometimes said that the juvenile court is itself a social work agency because it aims to reform rather than to punish and, in accordance with this objective, prescribes the conditions under which the treatment of each delinquent shall be carried on. It seems doubtful, however, that the judge becomes a social worker by reason of this changed conception of his duties. He still exercises a judicial function and, in general, plays the same role in the state's organization as under earlier conditions.

With the probation officer the situation is sometimes different. Probation officers have the duty of collecting material about each case for presentation to the judge and of supervising the children whom the judge decides shall be neither released nor committed to an institution. The collecting of information that has bearing upon the difficulties that an individual encounters in his relationship to some particular institution (in this case, the state) is one of the activities of social case work as previously described. Similarly, working with individuals in regard to these difficulties, attempting to help them work out solutions, is also social case work. It might therefore be concluded, as is often done, that probation officers are the court's social workers just as visiting teachers are the school's.

Some doubt is introduced into the argument, however, by three sets of facts. In the first place, the clients of these court social workers did not choose to become clients nor do they have any choice about staying in that situation. In addition it is the probation officer who is responsible for reporting to the court infractions of rules and for otherwise seeing to it that the child carries out the court's orders. Although this position of authority does not always prevent the establishment of the kind of relationship between the officer and the child on which so much of the ability to be helpful depends, it certainly introduces difficulties that are not present in the usual case work situation. In the third place, probation work as generally carried on consists chiefly of routine visits: visits by the children to the probation office to report on their recent conduct, and visits by the probation officers to their homes and schools to obtain information on the same subject. Help is sometimes given in finding jobs and recreation; probation officers often develop a good relationship with children and influence them favorably. But in almost all courts they have too many cases and too many other duties to give much time to individual guidance, even if it could be carried on under the authoritative conditions which necessarily obtain.

Whether case work with delinquents can be carried on by probation officers is an open question. The difficulties are sometimes met by separating the authoritative and the case work aspects of the work, the first being left to the probation officers and the second—the direct work with children—entrusted to social workers with or without formal court connections. In some communities, for instance, child welfare workers or case workers in local social agencies are given charge of juvenile delinquents by the probation officers or by the court. The whole question is too complicated for discussion at this point, where our interest is primarily in the relationship of social work to courts as instruments of the state. We see, however, that social work, in so far as it is practiced in that setting, performs the same function with respect to the state as it does with respect to other institutions. It helps the representatives of the state to carry out their duties by giving them information about the social factors having bearing upon the difficulties which the children in question encounter in being law-abiding citizens; and it offers help to the individual children in dealing with those difficulties.

Further confirmation of this principle is seen in the activities of social workers attached to courts. In some juvenile courts and also in some courts dealing with domestic relations, social workers act in a kind of "intake" capacity, interviewing persons who are considering entering complaints before the court. These social workers provide the individuals with an opportunity to talk over their problems, to consider the pros and cons of instituting court action and the alternative methods they may use to achieve their purpose. Through their help a considerable number of individuals are kept out of court, while those who decide to proceed with court action enter court with a clearer conception of why they want to use its services.

Similarly, social workers on the staffs of correctional or training institutions direct their activities toward assisting both the state authorities and the individuals who are in their charge. The duties of social workers in correctional institutions are much like those of social workers in mental hospitals: collecting information about the family, school, and neighborhood situations of the children for the guidance of the institutional staff; working with the families about problems related to the children's delinquencies; and—more so than in mental hospitals—working with the children themselves in regard to difficulties they encounter both in the institution and on the outside. As will be shown in a later chapter, social work that centers around the difficulties indi-

viduals encounter in abiding by the law leads into consideration of difficulties in other social relationships (particularly in family, school, and occupational groups), but this fact does not necessarily alter social work's primary objective. Probation work and social work in correctional institutions, however, are not yet solidly grounded in theory, and some activities are carried on under these names that do not fulfill the social work function. Of this, however, we shall have more to say later.[2]

The General Function of Social Work

The problem that led to this lengthy survey of some of the major types of social institutions was that of finding the place of the institution of social work among them. It was already clear that the institutional organization of society leaves some people uncared for, and that the causes may lie either with the people or with the institutions. It was further suggested by the survey of indubitably social work activities that social work is a response to that situation, but it was also recognized that it is not the only response nor one that is used by all people. It therefore seemed that an analysis of what some of the chief institutions are for, wherein they fail to serve some people, and what happens in that situation might lead to some conclusions as to the distinctive nature of social work and its general functions in the scheme of things of which it is a part. These conclusions have been stated in a tentative way and in variously phrased formulations throughout the analysis. It now remains to attempt to make a more generalized statement about them.

One of the most consistent findings in our analysis was that social work is concerned with individual cases in all their complexity and uniqueness. Just how this works out in practice will become much more clear in subsequent chapters, in which the actual work of social agencies is described, but here it can be stated dogmatically that it is not in the manner of social work to give generalized solutions to problems. In this lies one of its chief differences from the other means of assisting people who encounter difficulties in relation to social institutions. For instance, to meet certain specific needs of certain categories of people, pensions or social insurance benefits are provided, custodial institutions are set up, educational opportunities are widened. All who have the needs and meet the requirements may take advantage of the corresponding devices put forward for their alleviation. But

[2] See Chapter XV.

the service social work offers is that of discovering the peculiar nature of an individual's problem as he and others see it, and of working with him or them for its solution. This may be done individually or in a group; the method is unimportant. What is essential for the understanding of social work's function is a clear recognition of this individualizing aspect of its service.

A second finding was that social work is confined to problems arising in specific institutional settings, and that its solutions are in terms of the clients' relationships with organized groups. In this, social work is particularly distinguished from psychotherapy. Patients who seek the help of a psychotherapist also find themselves in difficulties in social relationships. These, however, are generalized difficulties (or if they occur in relation to only one type of organized group, this is taken as symptomatic of general maladjustment), and the help that is given is directed toward the patient's basic psychological problems and not toward his better functioning in some particular "reality situation." Social work is much more specific and limited. Its services may have important psychological benefits that carry over into various areas of life but they are not directed toward that end.

From these two findings and from the analysis of the kinds of help social work affords in relation to the various institutions, we come to the following formulation of the prime function of social work: *to give assistance to individuals in regard to the difficulties they encounter in their use of an organized group's services or in their own performance as a member of an organized group*. By this work not only are individuals aided but the adequate functioning of social institutions themselves is facilitated and human needs are thereby more effectively met.

In a sense, then, social work is an institution that serves other institutions. The family, for instance, it rendered more effective as a means through which basic needs are met when individuals who are without family ties are re-established in family groups, and when those who find it difficult to get along in a family group are helped to straighten out their problems. Educational and medical institutions can carry out their functions more effectively when the problems that individuals encounter in using their services are resolved through individual counseling and other forms of assistance that social work gives. This interdependency of institutions is, we have seen, characteristic of the total social structure, but it is only social work that has the specific task of rendering the work of other institutions more effective.

The analysis of the activities of social work has also shown some of the ways in which the function of social work is carried out. The basic method has been noted: that of considering each client's needs and desires in their own peculiar complex of conditions and circumstances. On this basis some individuals are given information about organized groups and their services and are helped to get in touch with them. Unemployed workers, for instance, are told about employment exchanges, mothers of dependent children are put in touch with assistance authorities, those whose insurance is in need of adjustment are helped to find the offices of the company through which this can be done. For others an actual place in some organized group is found. Children are placed in foster homes, arrangements for recreation are made for newly arrived foreigners or for delinquents who have only streets to play on.

Again, the service may consist of helping an individual remove the obstacles, material and psychological, that stand in the way of his using some organized group's services, such as those of a school or a hospital. In some cases the assistance is given in the interest of the total group's functioning, as when a family is enabled to stay together by the fact that a visiting housekeeper is provided, or a neighborhood organization is fostered by the formation of groups that discuss its problems. In other cases the individual is helped to become a more effective member of a group to which he already belongs; for instance, through a child guidance clinic or a parents' discussion group a mother may work out her problems in handling her children. Finally, social work facilitates the work of other institutions by providing members of various professional groups (judges, doctors, teachers, psychologists, institution administrators, and so on) with information about the attitudes, customs, and social situations of their clients or patients. In these and other ways social work acts as a liaison agent between individuals and groups and, through giving attention to the difficulties that the former encounter, strengthens the organization on which the satisfaction of human needs depends.

This work is carried on by both case and group methods. The former is the one more frequently used, for most of the problems people encounter in relation to their use of social institutions are thought to require the kind of help that can be given only on an individual basis. There are certain problems, however, that are believed to yield better to group methods (among them, the problems that children encounter in participating in recreational groups, and those that center

around a lack of neighborhood consciousness), and the development of techniques in this field of social work is proceeding rapidly.

For the carrying on of social case work and social group work, organization of effort and the provision of a material apparatus are required. It is this necessity that has been an important factor in the development of those other main divisions of social work about whose inclusion in the field, it has earlier been shown, there is some dispute—community organization, research, administration, and social action. The provision of facilities for the carrying on of social work requires, on the one hand, knowledge of the character and extent of needs to be met, and, on the other, the bringing of this knowledge to the attention of the public that is to provide the funds or other resources. Once set up, the organizations through which social work services are rendered must be administered, co-ordinated in the cause of efficiency and social welfare, and continually supplied with money and personnel. The effectiveness of current methods of carrying on work must be constantly scrutinized, and improved techniques must be developed. These and other activities of a somewhat similar nature are common to most social institutions, although in each they attain distinctive character by reason of the institution's objectives. It would seem, therefore, that the question of which planning, administrative, research, and political activities shall be considered a part of the institution of social work can be answered only in terms of which of them are called into being in order to facilitate the carrying out of the primary function of social work.

These conclusions will be tested in the following chapters where it will be shown how social work originated, what some of its theories and practices have been, and how it is currently carried on in some of its major fields. In that process some of the still vague and disputed aspects of the problem of what social work consists of will be discussed and the definition itself may be refined.

Suggestions for Further Study

Smith, T. Lynn, "Trends in Community Organization and Life," *American Sociological Review,* VI (1941), 325–34.

Analysis of the changes that are taking place in neighborhood and community relationships.

See reading list for Chapter V and pertinent articles in the *Social Work Yearbooks;* also Chapters XV, XVI, and XVIII of this book.

Part II

THE EVOLUTION AND PRESENT ORGANIZATION OF SOCIAL WORK

Chapter VII

THE ORIGIN OF SOCIAL WORK IN THE DILEMMA OF POOR RELIEF

The institution of social work, as described in the preceding chapters, is seen to embrace a wide variety of services and to number among its clientele a great diversity of people. It was not always so; nor is the popular conception of social work as almost synonymous with poor relief wholly wrong. Social work originated in the nineteenth century as a protest against the current methods of dealing with destitution, and it was only gradually realized that the kind of assistance its methods afforded would be of value to people in other situations as well. As a matter of fact, the specific nature of its function has never been adequately analyzed, with the result that the growth of social work and its extension into fields outside of poor relief have been rather fortuitous and have been justified on an empirical rather than on a theoretical basis.

Since the origin of social work can be fairly easily traced, it would seem that the testing of our hypothesis in regard to its function may well begin with a historical account. If the theory is correct, it should be found that the participation of some individuals in certain social institutions was handicapped and that the customary methods of dealing with that situation had proved unsatisfactory. Social work would be expected to arise in response to that problem and to be directed toward enabling individuals to make more effective use of certain institutional arrangements of society.

Analysis of the history of poor relief efforts—the conditions necessitating them and the difficulties attendant upon them—will show that such was the case. To comprehend the problem adequately it is necessary to go far back in the history of poor relief, for only in that way is it possible to realize the persistency of the problem and the variety of other methods that had been tried before the social work method of dealing with it was proposed. We shall confine our account largely to

England, both because the perspective there is longer and because social work originated in that country. It will be later shown, however, that the developments in the United States were very similar.

The Basic Problem in Poor Relief

The problem which poor relief poses is how to meet the needs of the destitute for food, shelter, clothing, and medical care and yet not "pauperize" them. Stated in institutional terms, this means how to insure that those people who are not provided for by the usual economic arrangements of society shall be maintained and yet not be incapacitated for future participation in the organized economic system. This is a problem that has puzzled the civilized world for centuries. It is intimately bound up with questions of economic and family organization, and the responsibilities of church and state. Legal, ethical, and moral rules and values are involved in it, and political and social movements as well. In fact the larger part of economic and social history could be written with the care of the dependent classes as its focus, so much is the problem intertwined with the rest of the development of modern society. In such a situation it is obvious that our analysis must be superficial and leave many questions unanswered and even unnoted.

From an institutional point of view, it is clear that in all societies the basic biological needs of human beings for shelter and subsistence are normally met through organization on the basis of production of goods and services. Whether the system be that of primitive communism, feudalism, capitalism, or socialism, means are always provided by which the majority of the able-bodied of the population either produce goods for the maintenance of themselves and their dependents or exchange their labor for goods or the means with which to purchase goods.

Now in all civilized societies, at least, there is a considerable number of people whose elementary needs are not met by the usual economic institutions—either because they or their legal supporters cannot or will not find a place in the system or because they are inadequately recompensed for their services. Whether the cause lies in the system's malfunctioning or in the individual's incompetence or improvidence has been a subject of debate for centuries, and proposals and plans for remedying the situation vary with the answers given. In this situation, in which goods essential to the preservation of life are not supplied to

individuals through the usual economic devices, other institutions develop to meet the need. The church or the state or private charity takes up the work, for no society can last long in which large numbers of people starve in the midst of plenty.

This assumption of the responsibility by noneconomic organizations is attended, however, by various social risks. The one usually recognized is that people will prefer charity to working and, consequently, that the needed goods will not be produced. This situation is likely to occur in societies which operate near the margin of subsistence and in those in which wages are low at best, for in the first the labor of everybody is needed, while in the second the individual has little to gain by hard work. The chief social danger is very different in societies or in periods in which there is not a lack of goods but a lack of jobs, and fairly adequate wages are likely to be obtained by all who can find work. In such situations the danger of pauperization is greatly diminished. (In a society in which some people are paid for withholding their crops from the market, it might reasonably be argued that others should be paid for withholding their labor.) Here the danger is one of break in morale, for in such societies a job is likely to mean much more to an individual than merely a means of attaining a living. People in such a society are highly competitive, and social worth is measured largely in terms of economic success. To have to receive one's living through other than the usual economic sources is therefore a disgrace and is potentially demoralizing to other social relationships. In this situation the major emphasis of the relief giver may have to shift from sustaining the client's desire to work to sustaining his self-respect, both for his own sake and for the effect on the morale of those with whom he is associated. Other combinations of circumstances will occasion other social dangers from poor relief, but in any case it will be found that the establishment of social institutions for the relief of poverty, which supplement the economic system but are not directly connected with it, is fraught with difficulty.

The history of poor relief in England is a record of two parallel movements: on the one hand, the building up of various kinds of devices (social institutions) to provide for the needs of the destitute; on the other hand, the trying out of various methods aimed at forestalling or overcoming the social dangers inherent in such devices. Social work originated as the last of a long series of such methods, and it is still far from being universally accepted either in England or in the United States.

In the course of the analysis of these movements certain trends in poor relief measures will be seen: trends toward differential treatment of the various categories of needy individuals (children, sick persons, the aged, and so on) and trends toward remedial measures directed, on the one hand, toward the individuals concerned and, on the other, toward the economic institutions. The analysis will also give some indication of the effect of various measures (of particular interest because many of them are still being urged upon legislators) and of some of the factors entering into their discontinuance.

These historical and evaluative aspects are presented, however, not so much for their own sake (much more space would have to be given to them if such were the purpose) as for their bearing on the main question, the relation of social work to the relief of poverty. In that connection the continuing interest of poor relief authorities in finding a way to sustain the ability of individuals to participate in the usual economic arrangements of society is of chief importance, for it has been shown that this is one of the specific ends to which social work is also directed. We are interested, therefore, in seeing under what circumstances methods other than social work were successful and why the social work means of dealing with the problem was proposed.

Early Methods of Individual Almsgiving and of Mass Relief

Centuries ago the main problem of poor relief was stated for Western Europe: How can a society maintain its destitute members and yet preserve in them, and in others who are almost equally poor, the will to work? The early answer was given in terms of a simple community organization in which the status and needs of individuals were well known and the economic system was such that provision for disasters through individual and family savings could not be generally expected. The dominant institution of the time was the church, which exercised a control over other institutions and over individual behavior that has no present counterpart. Since this was the church's position in society, and its teachings had always placed charity among the highest virtues, it naturally followed that the care of the poor was in its hands. In early Christian communities collections of money or goods through the church were primarily for poor relief, the distribution being left to the bishops, who presumably knew the needs of the individual applicants. Later, in about the sixth century, both church

and community organization having become more complex, parish priests took over the distribution of alms and combined with it visiting the homes of the poor, thus achieving that check on use and needs which the widening gap between givers and receivers necessitated.

Increasing distance between social classes (as contrasted with the primitive communism of the early church members) is indicated by the setting up in the eighth century of a system by which the care of the poor was to be paid for out of tithes, more or less compulsory levies on the incomes of church members. During the succeeding centuries the church's property increased enormously, as did that of the landlord classes in general, and in place of the face-to-face organization of early days, a complicated social structure emerged in which simple Christian charity to those in distress was replaced by desire to win social prestige or the soul's salvation through almsgiving. The distribution of relief by parish priests was abandoned and in its place came indiscriminate almsgiving through monasteries and private individuals. It was the custom for prelates and nobles to give meals and doles to all who came to their gates (it was said that the Bishop of Ely, for instance, fed two hundred persons daily), and the monasteries did the same. There was no organization of relief giving. Beggars could roam from place to place as they pleased, but whether the living they thereby picked up was adequate, history does not accurately record. Probably it was not; but neither was that which they were likely to obtain by more respectable means, for in spite of the luxuries in which the wealthiest could indulge, the bulk of the population was not far from the subsistence level. In such a situation the temptation to avoid work and spend a wandering life must have been great. Whatever may be the truth as to where the cause of the disorder lay—in the economic arrangements of society or in the character of individuals—it seems unquestionable that the number of more or less able-bodied beggars increased rapidly.

This same period, however, marked a great increase in the institutional care of certain classes of poor people. Some of the sick, aged, infirm, and cripples were taken into the monasteries, and others were cared for by hospitals (which housed the aged and infirm as well as the sick) or "foundations" established by bequests of the wealthy, and institutions set up by guilds for their members. Foundations were the characteristic form of medieval charity, says Ashley,[1] one of the few

[1] W. J. Ashley *An Introduction to English Economic History and Theory,* G. P. Putnam's Sons, New York, 6th ed., 1910, II, 318. Much of the factual material in this section of the chapter is from this book, pp. 306–76.

authorities on the subject of early philanthropy. They were set up by will or deed, the proceeds of land or other possessions being dedicated to the care of certain categories of persons. Like these foundations in their effect in marking off classes in need of separate treatment were the bequests of private individuals for such objects as the education of poor children and the provision of marriage portions for poor girls.

Little can be learned about how individuals were selected to be the beneficiaries of either these grants or institutional care, but it is certain that there was no medieval equivalent of a social worker to stand between the persons in need and the charitable enterprises—sorting, advising, and helping both sides to make effective use of the facilities. Instead, the charity of the Middle Ages was largely mass relief—somewhat equivalent to present-day soup kitchens and "flop-houses," in which help is given to all comers as long as the supply lasts. Then, as now, the system was demoralizing and, except for the education offered to children and the care given to the sick (both very slight, of course, by modern standards), there is little to indicate that as a result of receiving assistance people were put in any better position to help themselves. Instead, according to contemporary authorities, more and more were encouraged to lead a life of idleness, and the number of beggars grew to such proportions that the question of poor relief became one of the chief issues of the day.

The question was complicated by the increasing corruption of the administration of the funds, a fact which was recognized by both liberal Catholic leaders and those interested in church reform. Later the Reformation and the accompanying economic changes swept away many of the monasteries and hospitals and put some of the latter in local governmental hands. It is frequently said that these changes necessitated the English poor law system, and in a sense they did; but it is Ashley's opinion that a "new Poor Law was called for, not in order to remedy the evils produced by the abolition—so far, indeed, as it took place—of the charitable institutions of the Middle Ages, but to cope with the evils which had grown up in spite of these institutions."[2]

If a very broad generalization is permitted, then, one could say that by the end of the thirteenth century two methods of meeting the needs of destitute people had been tried in England and that both had failed to meet the problem. Since these are methods that are still proposed by some people, it is important to understand the chief causes

[2] *Ibid.*, p. 328.

of their failure. The first method was that of distributing alms through parish priests, who visited the applicants and knew their needs. It broke down when the church community ceased to be a small group composed of people of much the same economic level, who knew each other's ways of life intimately, lived according to the same ideals and standards, and were deeply interested in each other's welfare. The second method was that of mass relief—distribution of food and other goods to all comers with no questions asked. It probably prevented starvation in many cases, but it encouraged the growth of a class of professional beggars because individual worth and dignity counted for nothing and the system provided no incentives except to get as much as one could.

A Relief System Aimed at Repression and Deterrence

Through a series of laws known as the Statutes of Laborers, attempts to remedy this situation were made between 1350 (when the Black Death had greatly reduced the labor supply and changes in the economic order were increasing the demand for laborers) and 1530. In them the interrelationship of economic and philanthropic factors is clearly indicated, and it is difficult to decide whether these laws were primarily designed to maintain a large labor supply at low wage rates or to decrease pauperization. From our point of view the laws are important chiefly as introducing a new approach to the problem of poverty—one that finds vigorous proponents today. It is the "tough" method of punishing begging, prohibiting almsgiving, and forcing the poor to work.

The first statute starts with the assertion that "because many valiant beggars, as long as they may live by begging, do refuse to labor, giving themselves to idleness and vice, and sometimes to theft and other abominations, none . . . shall, under the colour of pity or alms, give anything to such . . . so that thereby they may be compelled to labour for their necessary living." [3] A later statute recognized that in addition to these "sturdy beggars" there were also "impotent" ones; that is, beggars who were not able to work. They, too, were not to be aided by private charity but were to be returned to their home parishes, where they were to be supported by collections taken in church.

This method of treating the able-bodied laborers who were asking

[3] Ordinance of 1349 (First Statute of Laborers), W. J. Ashley, *op. cit.*, p. 333.

for help could be effective only as long as jobs were actually available. In addition, it was adapted to a rural situation—one in which people could count on having a house and raising their own food in seasons in which work for wages was scarce. By the middle of the 1500's these conditions could no longer be counted upon to exist, for agrarian changes, bad harvests, and the expansion of manufacturing had disrupted the economic order. Sir Thomas More, writing in 1516, describes the conditions of the rural poor, turned off the land by sheep raising, as follows. Their condition seems comparable to that of the dispossessed Oklahoma farmers whom the dust storms and the advent of new machinery drove into California in the middle of the 1930's.[4]

By one means or other, either by hook or crook, they must needs depart away, poor wretched souls—men, women, husbands, wives, fatherless children, widows, woeful mothers with their young babes, and their whole household, small in substance and much in number, as husbandry requires many hands. Away they trudge, I say, out of their known and accustomed houses, finding no place to rest in. All their household stuff, which is very little worth, though it might well abide the sale, yet, being suddenly thrust out, they be constrained to sell it for a thing of nought. And when they have wandered abroad till that be spent, what can they then else do but steal, and then justly, pardy, be hanged, or else go abegging? And yet then also they be cast in prison as vagabonds, because they go about and work not; whom no man will set to work, though they never so willingly proffer themselves thereto.[5]

The situation was so bad that the question of how to deal with the poor received serious attention by both church and state. Among the plans and arrangements that received wide attention was that which the Catholic humanist Vives drew up for the town of Bruges. He proposed that a census of the destitute be made and all cases investigated, that those who could not work be cared for in almshouses, that children be educated, and that work under public or private auspices be provided for all who were capable of labor. The famous English statute, 43 Elizabeth, enacted in 1601, did not go quite so far as this in its provisions, but it did require the appointment of guardians of the poor in every parish and the collection of taxes to be spent on apprenticing children whose families could not support them, provid-

[4] For a vivid description of their condition see John Steinbeck's novel, *The Grapes of Wrath.*

[5] *Utopia,* Robinson's trans. 41, 42 (Arber's Reprint). Quoted by W. J. Ashley, *op. cit.,* pp. 352–53.

ing work for the able-bodied unemployed, and giving aid to the sick, aged, and those otherwise incompetent to work.

It will be seen that these plans continued the development toward organization and differential treatment, slight traces of which were found in the medieval system. Organization was necessitated by the increasing complexity of society. In England the church was no longer the dominant, unifying institution, nor was the little organization it had early effected in poor relief of any avail, for the distribution of charity had been taken over largely by municipal and other governmental authorities. The economic structure, too, had radically changed, and the close relationships of mutual dependency which had characterized the guilds and the feudal agricultural system were giving way to an each-man-for-himself philosophy that reached its climax in later centuries. The system of communication had greatly improved; people were moving from place to place in search of work in a way which was unknown earlier, and work itself was becoming increasingly specialized.

Differential treatment was an almost necessary corollary of organization, for when the problem of caring for the poor was analyzed into its constituent parts, it was readily seen that the needs of various groups of claimants for assistance were different, as were their rights to ask for help. Accordingly, from the middle of the sixteenth century on, attempts were made to distinguish the deserving from the non-deserving poor, and the able-bodied from those who were unable to work.

The general point of view, however, was—as the Webbs put it—that "persons who came into a state of destitution were, if not a source of danger to the community, at least a common nuisance. If they were able-bodied they escaped from their parishes, infesting the countryside as vagrants or mendicants, the willing recruits of rebellious factions. If they were sick, crippled, feeble-minded, infirm or aged, they augmented the hordes of importunate beggars, defrauding the pious and spreading disease among the inhabitants, whilst their dependent children died of neglect or were reared in idleness or crime." [6] Consequently the laws and the policies with respect to all classes of paupers were repressive and deterrent, and there was little generosity or human compassion in any of them.

Supplementing the Poor Law of 1601 were the earlier laws which

[6] Sidney and Beatrice Webb, *English Poor Law History: Part II: The Last Hundred Years*, Longmans, Green & Co., New York, 1929, I, 8.

severely punished begging (for the first offense, according to the statute of 1536, a beggar was whipped and for the third, hanged) and those which confined laborers and artisans to their home parishes if they expected to obtain relief. In their home parishes the able-bodied were put to work: at times at home, the goods to be worked on being supplied from parish funds; at times in the service of others in the community; and, by the Act of 1723, in workhouses, to which all the other classes of paupers were also indiscriminately condemned. The workhouses were deliberately made very unpleasant through overcrowding, insufficient food, and squalor. The system was effective in reducing the number of persons applying for relief, for many destitute persons apparently preferred to suffer outside rather than inside such institutions, but the effect on family life, children's health and morality, and the attitude of the able-bodied toward work was so bad that the system was abandoned about fifty years later.

Relief as a Means of Supplementing Inadequate Wages

There followed a period of experimentation with outdoor relief for the able-bodied poor and particularly with a plan that has a perennial appeal: that of supplementing inadequate wages by grants from the relief authorities. Besides being of interest because it is an arrangement which is suggested in each period of severe economic depression (it seems to be so economical to have the people who are on relief earn part of their keep by working for whatever wages they can get!), this "allowance system" is of importance to our investigation as the first admission by poor law authorities that the pauperism might be due to faults in the economic system. The period in which it was tried extended from about 1782 to 1834. It was one of social and economic disorganization, in which steadily rising costs of living were combined with declining real wages. In spite of great national wealth, the economic condition of rural laborers was poorer than at any time since the early 1600's;[7] and many urban workers were also hard pressed—forced to work long hours at low wages, and thrown out of employment by new machinery and frequent depressions. The wages of city workers were insufficient to provide them with savings for emergencies, and rural workers were rapidly losing the small holdings that had previously tided them over unemployment. In addition, all workers were restricted by the laws of settlement from moving about in search

[7] *Ibid.*, p. 4.

of jobs, so that, all in all, the situation was such that many had to rush for poor relief whenever any misfortune occurred. On the other hand, the national income was rapidly rising, and profits such as had never been dreamed of were being made. It therefore seemed to many a most expedient measure to give small grants out of public funds to unemployed workers and to those whose wages were not sufficient to meet their elementary needs, for in that way the expense of maintaining them in almshouses was saved, and they were kept in the labor market, readily available. But the effects of this policy were other than had been anticipated. Concerning them the Webbs say:

> When, under the Allowance System, the farmers and manufacturers became aware that they could reduce wages indefinitely, and the manual workers felt secure of subsistence without the need for exerting themselves to retain any particular employment, the standard of skill and conduct of all concerned rapidly declined. To single out the dull-witted employer and the lazy workman for special grants out of public funds, to the detriment of the keen organizer and the zealous worker, was obviously bad psychology as well as bad economics. . . . The Elizabethan Poor Law had become, by the beginning of the nineteenth century, a systematic provision, not so much for the unfortunate as for the less competent and the less provident, whom the humanity or the carelessness of the Justices and the Overseers had combined specially to endow out of public funds.[8]

A Method Designed to Make the Condition of the Relief Recipient Unpleasant

This line of reform (if such it can be called) did not last long, for both propertied and working classes objected to it strongly. The first group was dismayed at the rapidly rising costs to the taxpayer (the annual expenditures quadrupled between 1784 and 1818),[9] while the workers found their already low wages reduced and the relief grants miserably inadequate. In addition, as the Webbs point out, the Napoleonic Wars and the industrial changes led the propertied and intellectual classes to take a new point of view toward poverty. It was now no longer regarded as an unmitigated evil but in fact as something of a blessing, being the spur which drives mankind to labor, from which the benefits of wealth flow.[10] It accordingly seemed to the Royal Commission, which was summoned in 1832 to consider the

[8] *Ibid.*, p. 15.
[9] *Ibid.*, pp. 1–2.
[10] *Ibid.*, pp. 8–14.

whole question of poor relief, that all efforts should be directed toward giving people an incentive to work.

That incentive was found in the workhouse test, by which an applicant's need for relief was tested by his willingness to accept maintenance in a "well-ordered" but unpleasant workhouse. It was supplemented by the policy of making the economic condition of a pauper definitely poorer than that of the lowest-paid laborer. Under such conditions, said one Poor Law Commissioner later, "new life is infused into the constitution of the pauper; he is aroused like one from sleep, his relation with all his neighbors, high and low, is changed; he surveys his former employers with new eyes. He begs a job—he will not take a denial—he discovers that everyone wants something to be done." [11]

The plan had an additional advantage, in the opinion of its proponents: it operated as an automatic check on need. No longer was it necessary to make any inquiry into financial circumstances; if the applicant accepted "the house" in all its unpleasantness, that was proof enough. The plan was also justified as a way of reforming character, the belief being expressed that in the workhouse the destitute person would learn diligence and sobriety and would return to society a useful laborer. The method had more in common with penal practice than social work, but it at least indicated that thought was being given to removing what was considered the cause of unemployment.

The cruelty and ineffectiveness of the plan have been testified to by many contemporary observers,[12] and in subsequent years there was an increasing tendency to return to outdoor relief for the unemployed as well as for other classes of paupers.[13] Nevertheless, the workhouse and its test remained the official policy of the poor law administration for nearly a century.

Relief Measures for the "Impotent Poor"

To return to the treatment of the nonemployable classes of destitute persons, the sixteenth-century laws against begging and almsgiving applied to them also, as did the subsequent policies that fluctuated between use of institutions and outdoor relief. In the early period certain groups of people were assigned to the various hospitals of London

[11] *Ibid.*, p. 62.
[12] *Ibid.*, pp. 137f.
[13] *Ibid.*, pp. 146, 364–88.

(children, sick persons, and "vagabonds and idle strumpets"), while "honest, decayed householders" were given meager allowances at home. Over the years attempts were made to give separate attention to the problem of destitute children, education being much talked about and apprenticing definitely used. Nevertheless there were large numbers of children in the workhouses, while those on outdoor relief, for whom little if anything was done except through meager doles to their parents, numbered as high as two to three hundred thousand.[14] With respect to them, the Webbs report, there was "indifference . . . so long as they could be assumed to be under parental care, . . . that was common to all branches of Government and nearly all sections of the public."[15] Education was actually opposed (there were few free public schools in the middle of the 1800's) on the grounds that "it would be disastrous to make the lot of child paupers more advantageous than that of the children of the lowest-paid independent laborers," and that taxpayers must be spared the burden.[16] The sick, the aged, the infirm, and those of unsound minds were similarly left to custodial care or meager support outside of institutions, and no more was done by the poor law authorities than to keep them alive.

In urban communities a host of privately endowed funds and foundations and organizations supported by churches, fraternal orders, and private subscriptions supplemented the work of the poor law authorities. Institutions for the care of various classes continued the work of their medieval counterparts. Free meals and lodging were available in crowded areas, while tickets entitling the holder to fuel, clothing, and food could be easily procured. There was little or no coordination among the sources of distribution. As a writer in the *Encyclopaedia Britannica* puts it, it was a "disorganized medley of separate trusts, jealously guarded by incompetent administrators."[17]

Effects of These Various Measures

The condition of the poor under this combination of punitive poor relief, indiscriminate private charity, and an economic system struggling to adapt itself to the change from domestic to factory production was bad in the extreme. The following extracts from the writings of

[14] *Ibid.*, p. 247.
[15] *Ibid.*, p. 248.
[16] *Ibid.*, pp. 254–55.
[17] Eleventh edition, V, 883.

observers in the middle of the nineteenth century give a glimpse of the situation. Of the widows and children a doctor wrote in 1868:

If she [the widow] is honest and tries to be independent, she will at most get 1/6 [about 37 cents] a week on which to keep [her children and herself]. As, however, no child can be kept in simple necessaries, to say nothing of rent and education under three shillings a week, all these children are practically starved. Bread and treacle is the staple maintenance of this class, rags cover them, and the street is their school; it would be as unreasonable to expect that they should grow into healthy laborers as to look for grapes on thistles. . . . The masters and mistresses of ragged schools declare that the children continually cry with hunger and frequently fall exhausted from their seats for want of food, and that it is impossible to teach them in such a state.[18]

A less sympathetic writer of a pamphlet called *The Curse of Beggars* said:

At every crossing an impudent urchin trails a dirty broom before us and would fair lay upon us a tax. . . . In short intervals we encounter the whining interruptions of the sturdy Irishman who is always starving, or that odious girl who is always taking God's name in vain. We enter a pastry shop for a modest luncheon of biscuit or bun; a family of ragged vagabonds watch every mouthful we eat.[19]

Bosanquet, on the basis of personal experience and much study of the evidence, came to the following conclusion:

It cannot be doubted that behind this mass of chronic pauperism, beggary, and crime, there was an appalling amount of genuine misfortune and suffering. Not only the widows and orphans needed help, but men and women broken down by sickness and unemployment found their real needs overlooked in the clamour of mendicancy. . . . The very existence of the degraded class was a standing insult and injury to the genuine worker who shared its reputation for idleness and inefficiency and was deprived by it of the succour which should have come to him in times of misfortune.

. . . This then was the situation in London at the end of the sixties. On the one hand a confused mass of poverty, crime and mendicancy,

[18] Quoted by Helen Bosanquet, *Social Work in London, 1869–1912*, John Murray, London, 1914, p. 2.

[19] *Ibid.*, p. 4.

living side by side with the independent wage-earners under conditions of overcrowding and insanitation, and baffling all the efforts of authority and benevolence. The magistrates of the metropolis, one after another, expressed despair and hopelessness in presence of the clamorous crowds that beset their offices from day to day. On the other hand, a Poor Law administered so as to aggravate the evil, and a host of philanthropic societies and individuals confused and helpless before the magnitude of the demands made upon them.[20]

Without going into more detail, it seems that it can be correctly concluded that five centuries of effort to repress, deter, and punish pauperism left the condition of the poor unaltered in its essential features. There were doubtless relatively many fewer vagabonds in England in the middle of the 1800's than five centuries earlier, and the administration of public poor relief was no longer so haphazard; but what improvements had taken place in the material comfort of the poor were more largely due to a rising standard of living in the country as a whole than to a more favorable distribution of charity.

With increasing democracy and humanitarianism, revolt against the poor law methods was bound to come. During the nineteenth century it showed itself in two lines of development: in attempts to alter poor relief methods and to take philanthropy out of governmental hands; and in attempts to prevent destitution by improving the structure and functioning of economic, educational, and medical institutions. The latter found expression in factory legislation, agitation for old-age pensions, the beginnings of free education, and improvement in medical services. The former led to social work.

The two schools of thought produced bitter rivalries that came to a head in the Majority and Minority Reports of the 1909 Poor Law Commission. The Majority wanted to reform the poor law by incorporating into a new point of view about social treatment, while the Minority would have abolished it almost entirely, on the theory that adequate provision for health, education, housing, social insurance, and the like, would make it unnecessary. Our search for the origins of social work and its relation to poor relief will lead us to concentrate more on the former than on the latter methods, but from the vantage point of thirty years later one can easily conclude that both kinds of reform were necessary.

[20] *Ibid.*, pp. 5, 17.

The C.O.S. Plan: The Beginning of Social Work

Our analysis so far may have tended to suggest that as one plan for poor relief failed, another was put in its place. Actually, however, in England in the middle of the nineteenth century (and in the United States, too, to a considerable extent) most of the plans we have described were in operation at the same time. The indiscriminate doles of the medieval church were being repeated by a multitude of agencies and individuals. The hospitals and foundations of the Middle Ages were fairly well duplicated or continued in the present charitable institutions. Relief to supplement wages was being given by private charities. The punitive workhouse with its mixed population was still in operation, while outdoor relief continued its inadequate scale of benefits. Since none of these methods individually had greatly improved the lot of the poor, it was not to be wondered at that their combination was also ineffectual.

The middle of the nineteenth century, it will be remembered, was a period in which humanitarianism and democratic ideals mingled with assertive individualism, a belief in the wisdom and goodness of the rich, and trust in science and in businesslike management. To people with these values the squalor and misery of the poor were a continual reproach, and it was to be expected that they would come to the conclusion that a rigorous search for causes should be instituted. Thomas Chalmers, a Scottish minister, and a few others in the early part of the century had criticized both the methods and the administration of the poor law, and proposed substituting for it systematic investigations of individual cases under nongovernmental auspices. Money for relief was to be secured through private subscriptions. Chalmers himself tried out such a scheme in his own parish and was convinced that both the money and the needed services could be easily secured, and that pauperism would disappear when its causes (which he attributed to improvidence, ignorance, and the like) were removed. After his death his plans lapsed for a time but came to light again in the activities of a group of people who set up the London Charity Organization Society in 1869.

The leading ideas of that organization at the time of its initiation were these: the giving of doles should be stopped, relief giving should be co-ordinated, and each applicant for assistance should be carefully studied to determine what he needed to put him on his feet. The Charity Organization Society's particular part in the work would be

to interview the applicants, draw up plans for the treatment of their social disabilities, and secure the needed funds from already established organizations. Historians of social work generally agree that in this scheme lie the beginnings of the present system of organized social work activities.

It will be noticed that there were two aspects to the plan. First, the giving of relief was to be made orderly and businesslike. If the C.O.S.'s advice were followed, indiscriminate charity would be dispensed with; nobody would get assistance without investigation; no two organizations would knowingly assist the same person at the same time; and there would be no more supplementing of public aid by private donations, for that encouraged "passing the buck" back and forth between public authorities and private contributors, so that neither accepted real responsibility for dealing with destitution. To put this aspect of the plan into operation a new organization was to be set up: the district committees of the Charity Organization Society. This organization would not itself dispense relief funds but would stand between the applicants and the organizations that provided the services and help both of these parties to determine whether assistance was needed and, if so, of what it should consist.

In the light of our previous analysis it will be seen that both community organization and case work activities were implied in this part of the C.O.S. plan. Moreover, it is clear that the proposed new organization would discharge a social work function with respect to both the applicants and the relief organizations. In regard to the first, the work would be directed toward helping the applicants for assistance utilize the existing relief services (a social institution) effectively: that is, without damage to their "character." In regard to the second, it would enable the relief organizations to carry out more effectively their main purpose (the relief of destitution) by greatly diminishing the need for the inclusion of repressive or deterrent measures, which were introduced to offset the danger of pauperization.

The other aspect of the C.O.S. plan also fulfilled a social work function, but it had to do not with the applicant's use of a relief organization but with his re-establishment in the regularly constituted economic organization of society. This followed from the C.O.S.'s seemingly simple and obvious suggestion to study carefully the needs of each applicant in order to try to find a way of putting him in the position in which he could dispense with charity. This might be accomplished through finding him a job; securing medical attention

for him; if he was a child, seeing that he was given the necessary education; advising him about how to manage his money better; perhaps only giving him encouragement in working out his own plans. It would include securing money or other material assistance for the applicant if that was needed, but such assistance was not regarded as an end in itself but as a means to the end of enabling the person to assume his normal position in society.

This distinction between the two aspects of the plan was not made explicit by the C.O.S. founders, nor has it been generally noted since. That there is a clear distinction between them is seen, however, when the problem of relief is viewed from the standpoint of social institutions. Regarded in that way, it will be seen that what we have been saying throughout this chapter is that for centuries England was building up one kind of social institution after another for meeting the needs of people who were not adequately cared for by the existing institutions. For some people—such as the aged and orphaned children—the institution of the family had failed; for others economic institutions functioned inadequately; educational and medical resources were not available to those who needed them but could not pay for their services; and so on. Church and state and organized and unorganized private charity therefore set up substitute means of meeting these individuals' needs. They provided hospitals, schools, almshouses, workhouses, and public and private funds from which money and other material goods were available to those in direst distress. In a word, the poor law and private charity were institutions that rendered services to the destitute that other institutions (family, industry, medical, and educational institutions) provided to those who had sufficient funds.

In the opinion of the C.O.S. leaders, this secondary line of institutions was functioning poorly—meeting the needs of some people inadequately and encouraging others, who could have done without its help, to relinquish their normal institutional relationships (in the family and industry particularly) and to become dependent upon charity. The C.O.S. plan, therefore, was concerned with a reorganization of the management of the relief institutions and with setting up a new organization through which help to these institutions and to the people using them could be given. The C.O.S. leaders, however, did not draw a clear distinction between service to people with respect to their use of the relief institutions and service with respect to their re-establishment in the organized economic system. Actually, while

admitting the need for charity, they were more interested in helping people avoid charity than in helping them avoid the evils which were believed to be inherent in its use. In consequence of this implied denial of the possibility of a socially useful system of poor relief, the C.O.S. failed to win the support of the relief authorities and many philanthropic agencies, and social work as a method of helping individuals to make effective use of relief services was postponed for generations.

We come, accordingly, to a partial answer to the question with which this chapter started: the relation of social work to poor relief. In its origin, social work was a new and distinctive method of dealing with the problem of destitution. It was a protest against indiscriminate giving, mass relief, and charity as an end in itself. In so far, however, as it proposed using money and other material services as a means of helping individuals back to their normal place in society and deprecated aid that stopped with the temporary removal of distress, it limited its usefulness to the existing relief organizations and their clients. Later analysis will indicate that the chief reason for this failure to see the full implications of social work for poor relief lay in the assumption that most poverty was due to individual fault.

In attempting to put their plan into practice the C.O.S. staffs and later-day social workers ran into more difficulties than could originally have been dreamed of. Human nature and social structure revealed unanticipated complexities. The needs of the poor, the desires of the wealthy, and the social institutions through which both operated proved less amenable to the social workers' well-meaning efforts than was ever contemplated in the early planning. Nevertheless, the basic idea of individualization of service for the purpose of promoting effective use of social institutions proved sound; and social work—fashioned in the hard struggle of meeting the most real of human difficulties—developed unsuspected values not only in the field of poor relief but in other areas of social relationships as well.

Philosophy and Methods of the Early C.O.S. Case Work

A study of the early efforts to deal with the problem of extreme poverty through social work is of importance in our investigation because it shows why certain methods, which appear to be in line with common sense and which are still frequently proposed, are likely to fail and why some of the more advanced of the present-day prac-

tices came into being. As history, however, the following analysis is sketchy and incomplete. Instead of tracing the developments step by step we shall continue the plan of selecting a significant period and attempting to make understandable its practices and their consequences.

The activities of the district committees of the London C.O.S. in the earliest days are shown at their best in the work of Canon Barnett. He formulated their philosophy, carried on the work in a spirit of highest idealism, and revealed some of its weaknesses. Barnett was a clergyman who spent many years as vicar of St. Jude's in the Whitechapel slum section of London. Under his leadership Toynbee Hall, the first settlement house, was organized, and many social reforms were initiated. He was an important member of the group that founded the C.O.S. and for many years he headed one of its local committees.

In Barnett's opinion in the early days of his work, the causes of poverty were to be found in individual "wrong-doing," in the deterioration of character brought about by indiscriminate and easily procurable alms, and in the selfish concentration of the wealthy on materialistic interests and shallow luxuries. By "wrong-doing" Barnett meant chiefly idleness and improvidence, the desire to be supported by charity rather than by "honest work." This condition, which his observations as clergyman living in close contact with slum dwellers led him to believe was the prevailing one, he attributed to unwise almsgiving. He wrote in 1874:

> Indiscriminate charity is among the curses of London. To put the result of our observations in strongest form, I would say that "the poor starve because of the alms they receive." The people of this parish live in rooms the state of which is a disgrace to us as a nation. Living such a life they are constantly brought into contact with soft-hearted people. Alms are given them—a shilling by one, a sixpence by another, a dinner here and some clothing there; the gift is not sufficient if they are really struggling, the care is not sufficient if they are thriftless or wicked. The effect of this charity is that a state of charity to make one's heart bleed is perpetuated. The people never learn to work or to save; out-relief from the House, or the dole of the charitable, has stood in the way of providence, which God their Father would have taught them.
>
> Our experience this year has been terrible. Young men and women who have spent their lives in these courts have come begging; they have never been taught to read or write, or encouraged to believe that it is

their duty to support themselves. When sickness overtook them it found them unprepared; and this is still going on, for kind-hearted people by gifts of food and clothing are now educating another generation to lead this terrible life.[21]

Barnett and his fellow workers tried to attack the problem of dire poverty in two ways. On the one hand, in so far as they had control over funds, they rigorously abolished all indiscriminate doles and insisted that all relief under the poor law be given in a workhouse. On the other hand, they tried to put into effect plans for restoring individuals to self-dependence, these plans being based on careful study of the needs and capacities of the applicants.

Behind that reasoning lay several principles which to many of Barnett's associates seemed quixotic but which later developments in social work proved to be sound. In the first place, Barnett considered it degrading and pauperizing to have to ask for assistance from poor law officials, since they had to be suspicious of all statements because they were entrusted with conserving public funds. Second, he held that it was impossible to judge who was deserving and who was not deserving of being given assistance.

Who is to be the judge of character? Who is to say that A shall have out-relief and B go into the Infirmary, that C is to be treated as if he were an honored guest, and D as if he were a criminal? It may be that B has fought temptations, and had trials which have never come near to A, and that D has done kindnesses and helped others as C never dreamed of doing. There is no way in which strangers can judge character; the good and the evil must be let grow together; and he who attempts to separate them will destroy the good with the evil.

Beyond this there is something humiliating, a loss of self-respect, which is entailed in submitting to such judgment. The secrets and sorrows of a man's life are his own; his efforts to save, his charities to children and to friends, his afflictions, the sins of his youth, are not for public use, and he who is called on to expose them suffers irreparably in character. There is a necessary modesty for the character as there is for the person.[22]

These principles led Barnett to conclude that all outdoor relief under poor law officials (that is, under people who were business

[21] Quoted by Henrietta Octavia Barnett, *Canon Barnett: His Life, Work & Friends,* John Murray, London, 1921, p. 83.

[22] Canon Barnett, *Practicable Socialism,* 2d series, Longmans, Green & Co.; quoted *ibid.,* pp. 202–203.

representatives of the public rather than "friends" of the applicants) should be abolished. Instead, public relief should be given in a workhouse or other institution (he advocated great improvement in them), since these were open to all who wanted to accept such help at the cost of loss of freedom. For those who could be helped to reorganize their lives for self-maintenance, the services of "friends" (that is, C.O.S. committees) should be available. To these people they could tell their troubles without loss of self-respect because they would be asking not for alms but for assistance back to a position of respectability.

From the point of view of human psychology Barnett's principles still seem to be sound. England's experience with various poor relief methods had already confirmed the first principle. Forcing people in dire need to search for the most effective appeal (to have to resort to weeping or threats or faked stories in order to obtain alms) had led to deterioration of character in them and to an encouragement of similar conduct in others who were in less need of help. As to the impossibility of drawing fine lines between degrees of worthiness, the more that modern psychology has revealed about the complicated character of human motives and strivings, the more clear it becomes that nobody can sit in judgment on an individual's right to be helped. Modern case work, however, has evolved a different answer to the dilemma which these principles present to those engaged in the relief of financial distress. Of that we shall have more to say later.

The objective of social work, in Barnett's opinion, was character reform. As he put it, the work was to give "not palliatives for personal suffering but remedies for society's disease," which he regarded as indolence and dependence. In his search to reveal and make effective the sources of independence in the person being aided, Barnett could be stern and unyielding, for he was convinced that it was better that people should suffer greatly than that he should "interrupt God's method of teaching mankind." In his wife's description of how hard Barnett's "principles" were to live up to, one gets a sense of the lengths to which his convictions could carry him, and how they affected a less secure and perhaps more sensitive person.

> From his "principles" Mr. Barnett never parted, costly as it was, and indeed it is impossible to convey the long-drawn-out pain of obeying them. Often has a well-cooked dinner become nauseating because one knew the Jones children and their mother were famishing; but Mr. Jones was a drunkard, and the "principles" forbade the stealing of his duties

as a father, lest an incentive to his reform should be removed. Often has sleep been banished because in those grey hours, when things are grim and vivid, torturing doubt grew rampant as to the rightness of the "principles," which gave to one human being the best of beds in a picture-lined room, and the duty of denying to another the rent for a ramshackle single tenement home, for which such earnest plea has been made.[23]

In spite of what seemed at times to be ruthlessness in the interest of character reform, Barnett and his workers were saved from intolerance and dictator-like methods by their sense of respect for the clients' dignity and worth and by their genuine love of all human beings. Regarding investigation, for instance, Barnett wrote that it was "not so much for finding out the applicants' deserts as to show us, from his past life, the best means of helping him in the present,"[24] while Octavia Hill, the leading spirit in the C.O.S. movement, said:

Alleviation of distress may be systematically arranged by a society; but I am satisfied that, without strong personal influence, no radical cure of those who have fallen low can be effected. . . . If we are to place our people in permanently self-supporting positions, it will depend on the various courses of action suitable to various people and circumstances, the ground of which can be perceived only by sweet subtle human sympathy and power of human love.

By knowledge of character more is meant than whether a man is a drunkard or a woman dishonest; it means knowledge of the passions, hopes, and history of people; where the temptation will touch them, what is the little scheme they have made of their own lives, or would make, if they had encouragement; what training long-past phases of their lives may have afforded; how to move, touch, teach them. Our memories and our hopes are more truly factors of our lives than we often remember.[25]

All in all, then, the work of the early C.O.S. leaders was a logical, sincere, and earnest attempt to deal with serious problems in a clear-sighted, sympathetic manner. It revealed considerable knowledge of human psychology and much ability to find, intuitively, the sources of human strength. Nevertheless, it failed to make any great impression on the main problem against which it was directed—that of widespread destitution.

[23] Henrietta Octavia Barnett, *op. cit.*, p. 621.
[24] *Ibid.*, p. 83.
[25] *Ibid.*, pp. 29–30.

Why the C.O.S. Plan Failed to Solve the Problems of Poor Relief

The reasons for the failure of the C.O.S. methods were numerous. Indiscriminate charity continued to flourish and even to increase, for the public would not endure the sight of extreme poverty unrelieved except at the cost of sending whole families to the workhouse.[26] Accordingly, people with the worst "character defects" (from the C.O.S. point of view) could find many sources of financial aid outside the C.O.S. committees. This situation existed even in Barnett's Whitechapel union. Of it, the Webbs make the following report:

> A policy of refusing Outdoor Relief was combined not only with watchful private charity but also with an exceptionally enlightened and daringly experimental administration of the Workhouse (note, for instance, the Guardians' organization of employment for the inmates, the appointment of a salaried "Mental Instructor," and the adoption of the "modified workhouse test," under which in suitable cases, only the man was required to enter the Workhouse, his wife and children being allowed to keep going his home on Outdoor Relief). No small measure of success was justifiably claimed for this comprehensive Poor Law policy, so far as concerned many of the persons actually brought under its influence. Yet no marked improvement in the industry and thrift of the Whitechapel population, taken as a whole, could even then be claimed. The flood of indiscriminate charity remained unabated.[27]

In addition, the C.O.S. kind of help probably appealed only to those applicants for relief whose character (in the sense of willingness to accept guidance and conform to social standards) was already praiseworthy from the C.O.S. point of view. This fact was implied in the distinction the C.O.S. workers soon evolved between "worthy" and "nonworthy" applicants—a distinction of which Barnett wholly disapproved but which was doubtless a necessary concomitant of the methods used in the work.[28]

Barnett held that the C.O.S. methods failed to prevent destitution because its workers erred in "narrowing the teaching which inspired its founders into a set of rules," implying thereby that they had not been able to duplicate his firmness, tolerance, respect for human dig-

[26] Sidney and Beatrice Webb, *op. cit.*, I, 461–67.

[27] *Ibid.*, footnote, p. 464.

[28] For a discussion of Barnett's views on the subject and his subsequent break with the C.O.S. because of them, see Henrietta Barnett, *op. cit.*, pp. 658f.

nity, and ability to strengthen and lead others by the power of personality. Probably this was one factor in the situation, but social work could not develop a body of professional skills that could be passed on from practitioner to practitioner if it had to rely on such rare personal qualities as Barnett possessed. Closer to the real fault in the system, it seems to case workers today, was the Webbs' comment that "what was wrong with the C.O.S. was its deep-rooted censoriousness; its strange assumption that the rich were, as such, intellectually and morally the 'superiors' of the poor, entitled to couple pecuniary assistance with a virtual dictatorship over their lives." [29]

This attitude doubtless estranged many clients who might have been aided by a less authoritative and possessive approach, and may have had the result of limiting the agency's effectiveness to compliant or subservient individuals who could be almost as easily pauperized by the C.O.S. methods as by the doles which the organization aimed to replace. However that may be, it was true that the C.O.S. and other privately financed social agencies which were later modeled upon it did find it necessary to select their clients, for not only their methods but their objectives were such as were applicable to only a limited group of people. The aim of restoring people to participation in the normal organization of society through individual rehabilitation touched neither those who resisted such remodeling nor those who did not need it.

That the latter class was a large and challenging group Barnett himself came to recognize. But by the time he did so he had more or less broken away from the C.O.S. Writing at a time of severe economic depression (1892), he said:

> With regard to the social schemes, they seem to have made no appreciable difference. Sad and ragged figures crouch nightly in the doorways; thousands of men and women still haunt the common lodging houses, greedy as beasts of prey for food; and crowds of weak men who might have been strong still hang about street corners and wait for a job. The fact may cause us pain, but not anxiety. The most dangerous symptom

[29] Sidney and Beatrice Webb, *op. cit.*, I, 456. In making this criticism the Webbs did not overlook the accomplishments of the C.O.S., saying, "It is not easy to realize today how great was the work done in its generation by the C.O.S. . . . in educating English public opinion in the conditions of effective philanthropy. . . . The C.O.S. made the English-speaking world, in the last three decades of the nineteenth century, aware of the social obligation of regarding primarily the effect of philanthropy upon the recipient, and particularly upon his character, and that of his neighbors and acquaintances" *Ibid.*, p. 456.

of the disease of society is not the ragged sleeper on the door-step, but the ill-paid and unemployed worker. The ragged sleeper has had in one sense too much advertisement. His power of self-helpfulness has been destroyed by gifts and shelters and homes. If he is not one of the "knaves and dastards" whom it is the duty of society "to arrest," he is backboneless and feeble; his needs are not hard to discover, and would not be hard to meet.

The symptoms which point to a disease of much greater seriousness are of another character. Among such symptoms are three easily discernible: (1) many women working from morning till night for 15s. a week, or even less, are looking out with tired eyes on children made to be strong, but doomed to weakness, made to love mankind and understand mankind's Maker, but doomed to ignorance; (2) many laborers able to clean and carry, wander through streets encumbered with dirt they might remove, and seek in vain for work; they have good references, sometimes for twenty years' service, but they are no more wanted; a change in trade, an employer's temper has thrown them out, and there is nothing before them but the enforced uselessness of the workhouse; (3) many busy workmen, with powers to enjoy the best, find a few hours of leisure a weight on their hands, time to be killed in excitement, and turn again to work as if they were part of their own machine. . . .

The underpaid and the unemployed and the overworked, in the midst of a society where wealth is wasted and work wants doing, points to a disease not to be remedied by training farms, not even by reform of the Poor Law.[30]

For the alleviation of these conditions Barnett advised "automatic relief"; that is, relief available to everybody without inquiry into circumstances. He was in favor, for instance, of universal old-age pensions, free meals for all school children, medical service for all without cost, and public employment offices in which no fees would be charged. To state the matter in institutional terms, he favored extending the already constituted institutions of education, medicine, and industry in such a way that they would more adequately carry out their functions. The services of the institution of social work he would limit to people whose "character" disabilities kept them from joining in and taking their part in organized groups; that is, those who, for instance, needed encouragement and help in carrying out their duties as parents or in preparing themselves for and holding a job.

Underlying all these reasons for the failure of the C.O.S. plan to make a deep impression on the problems occasioned by poor relief

[30] Henrietta Octavia Barnett, *op. cit.*, p. 663.

was the fact that, in spite of its name, the organization did not really accept a relief system as permanently necessary. It did not recognize, in other words, that regardless of how well society is organized and functioning and regardless of individual strength of character, there will always be some individuals who for diverse reasons are incapable of participation in organized economic activities or are temporarily or permanently excluded from them. Hence the C.O.S. case work efforts were not directed toward the solution of the main problem that had beset poor relief for centuries—how to give relief and yet avoid its pauperizing effects. Instead of accepting the challenge of that problem (which, as a matter of fact, was not even stated in those terms until case work was far advanced), the C.O.S. workers aimed to eliminate the need for poor relief altogether. Nevertheless, the social work, with its individualizing methods, that they developed to that end was later put to other uses and, eventually, was applied to the solution of this basic problem of poor relief.

By the end of this first period of trying to deal with the problems of destitution through organized social work, we can see, then, that three lines of development were under way. First—and rather unwittingly—social work was started upon an independent path. It did not replace poor relief. In fact, as the years went by and many kinds of social work agencies were established, social work moved farther away from poor relief and extended its services to people without respect to their financial need. Relief-giving remained a service of many social work agencies, but it became increasingly clear that the use of money to effect social adjustment and its use to relieve economic distress were different in nature. Consequently, social work for many years flourished as an enterprise independent of poor relief. In the protected laboratory of private philanthropy, however, new points of view about the problems of giving and receiving help in social relationships were worked out that were ultimately found useful in the field of poor relief as well.

Second, the failure of the attempt to cure destitution by reforming paupers gave added impetus to the movement for reforming the economic system instead. Basic reconstruction was not aimed at, but numerous devices—such as unemployment compensation, health insurance, old-age benefits—were proposed by which it was hoped the flow of money from industry to the working population could be maintained.

Third, alongside the institution of social work and the institution

of social insurance, the institution of poor relief continued its task of meeting the minimum needs of the destitute. With the years the clientele of the poor law authorities became narrowed (by the social insurance schemes in England and the growth of private social agencies in the United States) but for those under its care the philosophy and methods laid down in 1834 and even in 1601 were in large part retained. Notable change in this situation did not occur in the United States until, in the 1930's, an unprecedented economic depression forced reconsideration of the whole problem of relief. Social security schemes, long in operation in Europe, were introduced; poor relief was greatly extended and revised; and social work was again challenged to make its contribution to the solution of the problem. The answer is still in the making, but we shall show in a later chapter [31] something of what has been done and some of the theoretical considerations that lie behind it.

Suggestions for Further Study

Ashley, W. J., *An Introduction to English Economic History and Theory,* G. P. Putnam's Sons, New York, 1910. (6th ed.) Vol. II, pp. 306–76.

A very clear, simple account of the history of English poor relief measures and their effects, from the time of the early Christian communities up to the seventeenth century.

Barnett, Henrietta Octavia, *Canon Barnett: His Life, Work, and Friends,* John Murray, London, 1921.

This book is particularly valuable in showing the original principles of the charity organization movement and the underlying system of values on which it was based, as well as the character of the individuals who were its earliest proponents.

Bosanquet, Helen, *Social Work in London, 1869–1912,* E. P. Dutton & Co., New York, 1914.

Describes the social and economic conditions under which the poor of London lived at the time the Charity Organization Society was founded, and traces in considerable detail the policies and practices of that organization.

Defoe, Daniel, *Giving Alms No Charity.*

deSchweinitz, Karl, *Six Centuries of Poor Relief* (scheduled for future publication).

[31] Chapter X.

Harnack, Adolf von, "History of Dogma," *Quarterly Review,* CXCVII, 384–94.

Description of the work of poor relief carried on by medieval church and hospitals.

Webb, Sidney and Beatrice, *English Poor Law History,* Longmans, Green & Co., New York, 1927 and 1929.

Three large volumes that analyze in detail the English poor law for a period of six hundred years, 1330 to 1928. Together with seven other volumes, also concerned with the structure and function of local government, they deal, as the Webbs put it, with the "origin, growth, and development of particular social institutions."

Chapter VIII

THE DEVELOPMENT OF SOCIAL CASE WORK

In describing the origin and early development of the charity organization movement in England and the circumstances that called it into being, we have been showing how and why the institution of social work came into existence. It is noteworthy that its original purpose was not to set up a new source of financial assistance to the poor but to make more effective use of those sources that were already in operation, both by making their distribution of funds more efficient and by helping individuals to use their assistance more profitably. In other words, the aim was not to duplicate existing institutions (such as that organized system of activities known as the Poor Law or those that were carried on by charitable foundations of various sorts) but to set up a new institution through which assistance would be given both to the existing relief institutions and to the individuals they served.

The need for such a new organization was occasioned by two facts. First, the existing institutions through which alms were given were so lacking in organization among themselves that they could not fulfill their functions properly. There was no clear demarcation of areas of responsibility, no means of clearing applications for relief so as to avoid duplication of service, no adequate devices through which the needs of applicants for assistance could be tested. In addition, there was much private, unorganized almsgiving and many sporadic, short-lived schemes for meeting emergency situations. Second, as a result of that situation, some individuals were being pauperized while others were being denied the money or goods they desperately needed. The situation was so confused and so detrimental to both social and individual well-being that a new set of activities was required to deal with it.

It was necessary, out of the nature of the situation, that this new set of activities be institutionalized, for obviously no single individuals

acting on their own initiative, each in accordance with his own ideas of what was fit and proper, could improve conditions. The institutionalization of the activities that later came to be called social work was apparent from the start. From the beginning it was planned that the activities should be carried on by duly appointed personnel whose duties should be carefully defined and whose lines of responsibility clarified; that the personnel should operate in accordance with rules that would state how they should conduct their work and to what end; that there should be a charter of values and principles and legal and ethical sanctions that would direct the activities, define their purpose to the members and to the public, and make possible their transmission from one group of practitioners to another. In spite of their initial inability to accomplish their immediate purposes, the C.O.S. founders did accomplish this institutionalization of activities, for the needs they sought to serve were imperative ones and many of their principles proved to be sound.

It will be noted that even among the earliest activities of the C.O.S. there appeared most of the aspects of present-day social work. Public welfare administration was represented by the efforts at establishing order and efficiency in the distribution of relief. Community organization was basic in the scheme. Social action was contemplated and to some extent carried out in attempts to influence poor relief legislation and otherwise to alter social and economic conditions that handicapped the poverty-stricken classes. Social case work was the most original contribution of the organization, and social group work services, although not directly undertaken by the Society, were utilized wherever they were available, such as in the newly established settlement houses.

In spite of this diversification of activities—and partly because some of them failed to make much headway at first—social case work and the accompanying organization of community resources on behalf of individual clients gradually became the center around which other social work activities revolved. In its development case work moved away from exclusive concern with problems of poverty and became a system of activities directed toward assisting individuals with their difficulties in any institutional relationship. Nevertheless, many of its theories and techniques were first worked out in relation to the difficulties that poverty produces in family life. The story, then, of how charity organization became family case work and what changes of

objectives and underlying assumptions that entailed is of basic importance for an understanding of social work today.

Organization of Private Charity in the United States in the Mid-1800's

Although the charity organization movement began in England, its metamorphosis into modern social case work took place largely in the United States. We must sketch briefly, then, the picture of private philanthropy in this country in the middle of the last century, when the plans for organizing charity were first laid here. As in England, charitable societies and foundations were confined largely to cities, for in small communities, the churches, poor relief officials, and the spontaneous gifts of neighbors took care of the most outstanding needs of the destitute. In large cities, a characteristically American phenomenon was the existence of relief funds restricted to particular nationality groups. One for Scottish people was organized in Boston as early as 1657; French and German societies were set up in New York, Baltimore, and other cities considerably later. As in England, there were funds for the aid of persons with particular needs. In Philadelphia, a society for "alleviating the miseries of public prisoners" was formed in 1787, the Massachusetts Charitable Fire Society was founded in 1794, and in the early nineteenth century numerous organizations were formed for the care of the sick, widows with young children or orphans, the hungry, and those suffering from lack of adequate clothing.[1] These grew rapidly in number, so that by 1878 there were, for instance, in Philadelphia 270 private agencies and 547 churches that gave aid to the poor.[2] During the nineteenth century the combination of immigration, low wages, and indiscriminate charity led to conditions much like those that we have earlier described as existing in London. Since these conditions were particularly abhorrent to a country that operated under a philosophy of equality of opportunity for all, governmental commissions and private societies were early instituted to inquire into their causes. The New York Society for the Prevention of Pauperism was founded in 1817, and a report on the pauper laws was made to the legislature of Massachusetts in 1821, and one to the New York legislature three years later. The conclusions of the latter

[1] Frank Dekker Watson, *The Charity Organization Movement in the United States*, The Macmillan Company, New York, 1922, pp. 65–66.

[2] *Ibid.*, p. 187.

report picture existing methods and results of poor relief as very similar to those of England:

. . . The poor when farmed out or sold were frequently treated with barbarity and neglect.

The education and morals of the children of paupers (except in almshouses) were almost wholly neglected. They grew up in filth, idleness, ignorance, and disease, and many became early candidates for the prison or the grave.

There was no adequate provision for the employment of the poor throughout the state. Idleness very generally generates vice, dissipation, disease, and crime.

The poor laws had come to encourage the sturdy beggar and profligate vagrant. Overseers not infrequently granted relief without sufficient examination into the circumstances or the ability of the party claiming it.

The laws also held out encouragement to the successful practice of street beggary.

Idiots and lunatics did not receive sufficient care and attention in the towns, where no suitable asylums for their reception were established.

These commissions and private societies did much to prepare the way for the later formal organization of charitable efforts. In fact, several of them definitely foreshadowed the charity organization societies' plans. Among these organizations an important example was furnished by the New York Association for Improving the Condition of the Poor, which, founded in 1843, a time of severe economic depression, had a program with objectives somewhat like those of the later charity organization societies. Its main emphasis was on the social condition of the poor and their weakness of character. The distinction between pauperism and poverty was stressed, and it was held to be the aim of the society to save "the poverty-stricken sons and daughters of misfortune" from "the lower and almost hopeless depths of social degradation" into which they would descend unless they were given aid and counsel. Wealthy young men were engaged as visitors to the poor, their task being "by discriminating and judicious relief combined with admonitions to prudence, thrift, diligence, and temperature, to help them discover those hidden springs of virtue within themselves from which alone their prosperity might flow." [3]

Emphasis was also put upon improving neighborhood and general social conditions, securing the co-operation of other philanthropic agen-

[3] Isaac Smithson Hartley (editor), *Memorial of Robert Milham Hartley,* privately printed, Utica, N. Y., 1882; quoted by Frank Dekker Watson, *op. cit.,* pp. 80–81.

cies, and publishing pamphlets and tracts designed to stimulate self-effort. By 1875 it was claimed that in at least twenty-nine cities organizations based on the A.I.C.P. pattern had been founded. By this time, however, the movement had lost much of its early preventive and reforming vigor and had become primarily concerned with the distribution of relief. Accordingly, when the panic and depression of 1873 again brought to public attention the distressed condition of the poor and the inadequacy of existing methods to meet their need, interest in the London charity organization plan was easily aroused. Within ten years twenty-five such societies and about ten affiliated organizations had been established in eastern and middle-western cities.[4]

The Original Social Philosophy of the Charity Organization Societies

The philosophy of the early work of these societies was essentially that of the London C.O.S., described in Chapter VII, although practices varied somewhat with local conditions. The basic assumptions were that extreme poverty evidences character defect and, conversely, that success in the economic struggle signifies strength, fitness, and righteousness. These beliefs which now sound so strange (though, as a matter of fact, they are still subscribed to by many Americans) were not invented by social workers but were characteristic of the age. The Puritan conviction that "character is all and circumstances nothing" and poverty a moral failing that should be condemned[5] had been reinforced by the economic doctrine of unrestrained competition, the Malthusian principle of inevitable poverty, and the Darwinian conclusion regarding the survival of the fittest. Social work, in seeking to rescue the poor by moral suasion, was merely directing the humanitarian impulse within the framework of existing social philosophy. To say this is not to condemn the social work of the middle of the last century but to make it understandable. A similar concurrence between the assumptions of social work and major trends in general social philosophy will always be found.

The doctrine that poverty is due to individual fault—and the subsequent division of the poor into the deserving and the nondeserv-

[4] Frank Dekker Watson, *op. cit.*, p. 211.

[5] R. H. Tawney, *Religion and the Rise of Capitalism*, John Murray, London, 1926, p. 231.

ing—was perhaps even more acceptable in the United States than in England, for in the latter country the conception of a stratified society would seem to belie it, while here the doctrine was in line with that other widely held belief that every person has an equal chance to become rich. In fact, what the followers of the C.O.S. plan did was not so much to introduce this doctrine into American social work (the Association for Improving the Condition of the Poor also had the doctrine among its basic tenets)[6] as to indicate how the moral disability of individuals could be overcome.

The necessary method for achieving this end, it was held, was that of working slowly case by case and utilizing the power of personal relationships. Through kindness, wisdom, and friendship it was believed that the weak moral fiber of the poor could be strengthened and that they would be enabled to derive real benefit from whatever material aid it seemed best they should be given. The aim of the work was to effect permanent change: to make the able-bodied self-supporting and to insure permanent care for the aged and infirm. Much of this work of moral regeneration was carried on by "friendly visitors"—well-to-do young men and women each of whom was entrusted with encouraging, guiding, and maintaining friendly relationships with several families over long periods of time.[7] Although this plan seems naïve, smug, and condescending from our present point of view, it is important not only to remember that it was a protest against blind, indiscriminate almsgiving that took no account of individual differences, but to notice that it contained certain elements (individualization and the use of personal relationships) that still distinguish social work from other forms of social welfare activities.

Social Workers Discover Economic Determinism: The Era of Social Reform

The charity organization movement had not been under way ten years before the doctrine that poverty is due to character defect was challenged by social workers themselves. As a matter of fact, it never

[6] A tract of the New York Association published about 1850, for instance, said, "Every able-bodied man in this country may support himself and his family comfortably; if you do not, it is probably owing to idleness, improvidence, or intemperance." Quoted by Frank Dekker Watson, *op. cit.*, p. 85.

[7] This plan had the additional aim of arousing and maintaining the interest of the wealthy in the problems of poverty, to the end not only that they would finance the organizations' activities but they would modify some of their own practices.

had been universally accepted as a complete explanation. Joseph Tuckerman, for instance, whose influence during the 1830's was very great, had held that much destitution was attributable to "the inadequacy of the wages paid to the large class of the poor to supply even the bare necessities of life, and the frequent occurrence of periods, even of months together, during which . . . large numbers in cities find it impossible to procure any employment whatever." [8]

Later-day social workers and friendly visitors, becoming acquainted with the daily lives and circumstances of individual after individual family, confirmed this conclusion. They found that often the wretched housing and neighborhood conditions under which the poor had to live could not be counteracted by even the most diligent and careful housekeeping; that jobs were often scarce and inadequately paid and that many willing workers were unable to earn a decent living; that sickness undermined the best efforts of many; that inadequate and inappropriate schooling sent young people into "blind alley" jobs; that "loan sharks" and unreliable banks undermined the meager attempts at saving that were possible. These and many other adverse social conditions quite out of the control of the individual client were revealed as soon as social workers began seriously to study in detail the facts of each individual case. The speculations of the armchair yielded to the observations of the field and, to those who were willing to see, it became apparent that the theory of individual fault was not adequate to account for poverty or even pauperism. In this view social workers were sustained and encouraged by the current theories of sociologists, economists, and biologists, which stressed environmental determinism and the abundance rather than the "niggardliness" of nature.[9]

The result was that prominent social workers began to question the basic tenets and objectives of social case work. In 1895 the chairman of the Charity Organization Committee of the National Conference of Charities and Correction said that although helping individuals one by one was important, charity organization societies must do all they can "to abolish all conditions which depress, and to promote measures which raise men and neighborhoods and communi-

[8] Edward Everett Hale in editor's note to Joseph Tuckerman's *On the Elevation of the Poor*, 1874, p. 79; quoted by Frank Dekker Watson, *op. cit.*, p. 73.

[9] Among the intellectual leaders, influential because of their interest in "social problems," were Richard T. Ely, S. N. Patten, Francis Peabody, and Frank Sanborn.

ties."[10] The president of the Boston Associated Charities went further and asked: "Has not the new charity organization movement too long been content to aim at a system to relieve or even uplift judiciously single cases without asking if there are not prolific causes permanently at work to create want, vice, crime, disease and death; and whether these causes may not be wholly or in a large degree eradicated? If such causes of pauperism exist, how vain to waste our energies on single cases of relief, when society should rather aim at removing the prolific sources of all the woe."[11]

The reaction of the charity organization societies to these discoveries and questions was two-fold. On the one hand, attempts were made by the societies to supply some of the lacks that had been found in the social system. The Buffalo society, for instance, added to its regular work the maintenance of an employment bureau, woodyard, laundry, and workrooms (for the sake of providing employment to needy clients), wayfarers' lodges for homeless men, a loan society, a penny-savings bank, day nurseries, diet kitchens, visiting nursing service, and an accident hospital. The Orange (N.J.) Bureau of Charities sold coal and groceries to its clients at cost. The Washington Society established a school to train girls for domestic service. The Brooklyn Bureau of Charities set up a training program for the handicapped.[12] Other devices for offsetting the social handicaps from which clients were found to suffer included legal aid bureaus, recreation programs, "fresh air funds," summer camps for children, and "baby saving" programs.

On the other hand, the charity organization societies initiated or participated in movements designed to improve or alter the existing social scheme. They appointed and financed committees that conducted studies, secured publicity for findings, backed legislation, and even aided in the enforcement of legal provisions. Their fields of special interest included such varied ones as housing, tuberculosis, juvenile delinquency and probation, court and other legal reforms, workmen's compensation and child labor legislation, and general working conditions. As an example of their work the activities of the New York

[10] Jeffery Brackett, "The Charity Organization Movement: Its Tendency and Its Duty," *Proceedings of the Conference of Charities and Corrections* (1895), p. 86. Quoted by Frank Dekker Watson, *op. cit.*, p. 279.

[11] Robert Treat Paine, "Pauperism in Great Cities: Its Four Chief Causes," International Congress of Charities, Corrections, and Philanthropy (1893), I, 35. Quoted by Frank Dekker Watson, *op. cit.*, p. 278.

[12] Frank Dekker Watson, *op. cit.*, p. 226.

Charity Organization Society may be cited. Although somewhat more extensive, they were not different in nature from those of societies in other cities.

With respect to housing, this organization in about 1900 set up a special committee with a paid secretary to consider needed revisions in building laws as they affected tenements. Through its efforts a state commission was appointed whose recommendations were made the basis of legislation, and subsequently the committee took an active part in the enforcement and safeguarding of the tenement house laws. A few years later the Society entered into an active educational campaign for the treatment and prevention of tuberculosis, which led to the formation of the National Association for the Study and Treatment of Tuberculosis. In the field of probation the Society's efforts were chiefly confined to providing a woman probation officer to a magistrate's court and later to the children's division of the Court of Special Sessions. The Society's Committee on Criminal Courts supplied the magistrates and justices with expert service and social data pertinent to the solution of their special problems, and also framed and secured the passage of a bill setting up a separate children's court and in other ways improving the judicial structure. In these and other ways the Society gave expression to what had become one of the chief aims of social work: "To seek out and to strike effectively at those organized forces of evil, at those particular causes of dependence and intolerable living conditions which are beyond the control of the individuals whom they injure and whom they too often destroy."[13]

For about two decades these activities of a "social-action" nature were in the limelight in social work—so much so that some held that the development of case work was being neglected. Conscious refinement of case work techniques was at a minimum during this period, but the emphasis on the environmental causes of poverty nevertheless slowly altered case work philosophy and theory. One change was evidenced by the decision of the New York C.O.S. in 1896 to strike from its constitution the word "deserving" in reference to clients. A second change was indicated in studies of certain categories of clients (family deserters, inebriates, vagrants) which reinforced the growing conviction that a moralistic approach to problems was not sufficient. Another change was that which took place in the topics covered in

[13] Edward T. Devine, "The Dominant Note of Modern Philanthropy," *Proceedings of the Conference of Charities and Corrections* (1906), p. 3. Preceding material about the activities of the New York C.O.S. from Frank Dekker Watson, *op. cit.*, pp. 287-323.

the social worker's investigation of a client's circumstances and needs, social and economic circumstances rather than character traits being stressed. Along with these changes went an emphasis on "objectivity" in observation and recording, a stress on "the facts" as distinguished from the case worker's value-weighted impressions. In short, environment had replaced character or morals as the basic causal concept.

One effect of the new point of view was to increase the amount of work required for adequate understanding and treatment of cases. This may have been one of the factors leading to the renewal of interest in social case work: it was more interesting, more challenging than for a time it had appeared to be. Another explanation for the decline of interest in social reform, if not for the rise in interest in case work, is found in the altered intellectual and political atmosphere after 1917. The war was a partial reason for the change, but even before the war "muckraking" activities had been abandoned when their challenge to capitalism was realized.

Parenthetically, it is interesting to note the correlation between social work movements and general economic and philosophical changes. Several of the points of concurrent alteration have already been indicated: the founding of the A.I.C.P., the C.O.S., and the much earlier shifts in English poor law policy occurred in periods of economic crisis or change. The moralistic and the environmentalist explanations of causes of poverty were but applications to social work of concepts widely accepted in other fields. So it was with the social reform interest of social workers in the period between about 1895 and 1915. Not that the interest was not genuine or that social workers did not make important contributions to the movement. The point we would make is that social work did not undertake an independent campaign; interest in reform was widespread at that time. Scholars, lawyers, political leaders, novelists (Velben, Beard, Dewey; Brandeis, Untermeyer, Walsh; Roosevelt, La Follette, Wilson; Ernest Poole, Upton Sinclair, Jack London), even ten-cent-magazine writers were engaged in a violent effort to expose the "cesspools that were poisoning the national household." That campaign was brought to an abrupt close when the part that big business played in the poisoning was made too clear. The first World War wrote finis to the endeavors of reformers, and the postwar prosperity turned the thoughts of social workers into very different channels.[14]

[14] For a brief review of the period, see Vernon Lewis Parrington, *Main Currents in American Thought,* Harcourt, Brace and Company, New York, 1930, III, 401–13.

Influence of the Socioeconomic Orientation on the Development of Case Work

When case work became again the center of interest of charity organization societies the influence of the years of concern with improving environmental conditions could be seen. It was now no longer deemed sufficient to concentrate attention on the breadwinner of the family and on his problems of earning a livelihood. The whole family had to be taken into consideration as well as all the conditions that might handicap its members in the economic struggle. Health, schooling, vocational guidance, housing and household management, marital relationships, child care, recreation—all the aspects of family life came into the range of the social worker's interest. It was held to be the social worker's job to study the total situation fully, and, in the light of it, to draw up plans for the clients' rehabilitation.

Thorough investigation and, on the basis of it, accurate diagnosis, co-operation with sources of assistance, and treatment were conceived as the elements of the case work process. This was not a new analysis of the steps in procedure; the novelty lay in the content of these concepts as now articulated. The old modes of investigation were considered naïve and amateur in the extreme. The list of sources of information now seen as available has been stated as follows: "Church connections, either clergymen, fellow church members, Sunday-school teachers; landlords, both former and present; lawyers, medical agencies, including physicians, dentists, hospitals and sanatoria, dispensaries, nurses, midwives, social service departments; neighborhood references, including former and present neighbors and former and present tradesmen; pawnbrokers; private social agencies . . . ; public officials . . . ; public records, including records of births, baptism, death, contagious disease, marriage, divorce or legal separation, property, guardianship, or insurance; relatives; school officials, including teachers, truant officers, medical inspectors and nurses, school visitors, fellow pupils; social, trade and benefit societies . . . and other clubs." [15]

On the basis of facts thus obtained the "social diagnosis" was made. "Social diagnosis," said Mary Richmond, whose work on that subject was the social worker's bible for years, "is the attempt to arrive at as exact a definition as possible of the social situation and personality of a given client. The gathering of evidence, or investigation, begins the process, the critical examination and comparison of

[15] Frank Dekker Watson, *op. cit.*, footnote, pp. 118–19.

evidence follows, and last come its interpretation and the definition of the social difficulty."[16] Great importance was attached to this aspect of the work. Again and again it was stressed that for any given family there is only one best arrangement[17] and that "a whole life may be affected for weal or woe by a single decision in the plan of treatment."[18]

Under "co-operation" the concept of charity organization was extended to include not only the sources of financial aid but all the philanthropic and other social resources of the community. These covered the same range as the sources of information stated above, and it was held to be the social worker's duty to "organize" them in the interest of his clients' welfare. "Treatment" was conceived largely in terms of this organization of resources, although it was held to include "organizing" the family's own inner resources as well (their "capacity for affection, training, endeavor, and social development") to the end that a permanent solution to their difficulties should be reached. It will be thus seen that there was a "community organization" aspect to case work as well as to the broader field of social welfare.

These were highly important developments in the evolution of social case work, but their full significance appears only when their relation to the institutional and functional theory of social work is considered. Viewed in this light, it will be seen that the early "moralistic" era of case work concentrated attention on the individual's inner problems with respect to social responsibilities. He should work, he should save, he should not drink, he should send his children to school, he should maintain an orderly and efficiently managed household. If he did all these things, economic well-being would follow as a natural consequence. Just to insure that it would (to prime the pump, as it were), the social worker was prepared to secure financial or other material assistance for the deserving client—one who was putting forth effort to do all these right things. The emphasis, however, was on self-help, self-responsibility. "No man," wrote Edward Denison, one of the leaders in the London charity organization movement,

[16] Mary Richmond, *Social Diagnosis,* Russell Sage Foundation, New York, 1917, p. 62.

[17] For instance, Mary Richmond, "Some Methods of Charitable Co-operation," *Charities,* VII (1901), 114.

[18] Frank Dekker Watson, *op. cit.,* p. 116.

"may deliver his brother; he can but throw him a plank."[19] The plank was formed of advice and encouragement. "Not alms," said Octavia Hill, "but a friend!"

This "moralistic" era contributed to social case work three of its basic concepts: individualization (each case, in its combination of circumstances and needs, is unique and must be considered on an individual basis); self-responsibility as both the means and the goal of the work; and the use of the personal relationship to bolster the client's inherent strengths. So stated, the work would appear to have been "modern" to a high degree. The difference is found, however, in the content of the term "personal relationship" (that is, in how the relationship was used in actual practice and what kind of help it connoted), and in the absence of the concept of social organization.

The next era of social case work—that which has been described above as following that of social reform—is distinguished by its concentration on the institutional arrangements of society. It was in these, as much or perhaps more than in the clients' inadequate sense of social responsibility, that the causes of poverty were thought to lie. Industry, housing, schools, medical resources, and so on, were doubtless in need of reform, but in addition (and this discovery justified the reversion of the agencies to great interest in social case work) poverty-ridden families were found to need help in making use of the organized services that were available. Poverty could not be eliminated by paying attention only to the breadwinner and stimulating him to better his family's condition. All the family had to be taken into consideration, and all their relationships with the outside world had to be made straight. It is this point of view that accounts for the long list of informants that were to be consulted, the long list of "resources" (social institutions) that were to be used in setting a family on its feet.

The social resources to be drawn upon testify to the social workers' recognition of the complicated and mutually dependent organization of society, but they also show that the newly named family welfare work (as charity organization societies were beginning to call their occupation) was not concerned so much with the family itself as an institution as with all the institutional relationships of the family members. Describing in approving terms this era of charity organization work, one of its historians says:

[19] Sir Baldwyn Leighton, *Letters and Other Writings of Edward Denison,* Richard Bentley, London, 1872, pp. 20–21.

The old view of charity was to see mainly the immediate conditions and resulted often in helping people *in* their poverty. The new view studies the applicant's whole situation, in order to discover how many and how varied his disabilities may be, and at the same time, looks for every weak place in the organization of the family of which he is a part in order to strengthen it. In short, it aims to help people *out* of their poverty and to keep them out.

Such treatment includes not only the breadwinner, whose temporary sickness may have been the occasion for turning to a charity organization society, but extends to every member of the family, including the youngest child, who is viewed as the potential head of a family, whose foundations are now being laid in his or her education or lack of it; in his or her health or ill-health; and in his or her moral stamina or lack of it. In short, adequate treatment means not half measures, but helping thoroughly, carrying through resolutely, a plan no matter what the expense. It implies always the long range point of view, the attitude of mind that looks ten or fifteen years or even longer into the future.[20]

Self-help was still talked about (case workers must work with and not for individuals, it was often said) but actually the diagnosis and planning, as has been shown, were very much in the case workers' hands. The reason was twofold, in addition to the fact that little technical progress in the use of personal relationships had been made beyond that of advising, exhorting, and reassuring.[21] On the one hand, case workers viewed themselves as experts in planning: they had the objective, outsider's view; they could see the weak spots, trace their derivation, and decide how best they could be eliminated. On the other hand, it was they who knew about and had influence with the sources of help; and the number that they succeeded in interesting in given cases was often amazing.[22]

[20] Frank Dekker Watson, *op. cit.,* pp. 142–43.

[21] The art of persuasion was so much an accepted part of social work methods that a study of the practice of social work, made by the American Association of Social Workers in 1928, centered the whole analysis around how persuasion was used. *Interviews,* The American Association of Social Workers, New York, 1928.

[22] A case from the Atlanta Associated Charities' files of 1909, cited approvingly by Watson, shows the following list of services: "An oculist examined the wife's eyes; an optician gave her glasses; an institution supplied temporary employment to the husband, at which he proved his willingness to work; relatives cared for the children while both parents worked; a shoemaker agreed to take the man into his shop and teach him the trade; a Sunday-school class provided money equivalent to the wife's earnings so she might care for the children; a public hospital treated both man and wife during temporary sickness; a dentist cured the wife's neuralgia by treating her teeth; the same Sunday-school class guaranteed the cost of a shoemaker's outfit for the man and paid

Regardless of how the help was given, however, it is clear that this era of case work added to the fundamental concepts of social work the definition of the field wherein its services lay. Social work was no longer regarded as confined to the relief of poverty, though that was still the factor occasioning the referral of most cases to the agencies' attention. Its essential task lay, it was now seen, in the facilitation of social relationships: the bringing together of the needy individual and the organized groups whose services he might use or in which he might find his proper place. Hospitals, schools, recreation centers, relief agencies are examples of the first type, while industry, neighborhood, foster families belong to the second, which also may include the client's own family in both its objective and psychological aspects.

This definition of the field of social work was not made (in a sense has not yet been made) in very precise terms. There was an implicit assumption that there was something wrong with an individual's or a family's social relationships when the individuals did not have enough to eat, were reluctant to make use of hospitals, did not become Americanized rapidly, or produced illegitimate children, and it was considered the social worker's task to set these matters right—to effect the needed social contracts or to remove the friction and misunderstanding which created social disharmony. But why such difficulties should be considered failures in social relationships was never clearly described. Consequently, the function of social work could not be definitely formulated, social work efforts became very diffuse, and only time, money, and energy set limits to what a social worker attempted to do.

Social Workers Discover Psychology and Psychiatry

The task encompassed by this conception of the objectives of social work was greatly enlarged by the next set of developments in social case work. It had always been recognized by charity organization leaders that the personality or character of the client was a factor of great importance. To the early workers, in fact, this had been the central focus of what is now called case work treatment. Though interest in character reform had been somewhat disavowed during

rent while he was building up a business; numbers of individuals were found to give him work."—Frank Dekker Watson, *op. cit.*, p. 140.

A somewhat similar form of service is given by present-day "community councils." Concerning them see articles in recent *Social Work Yearbooks,* Russell Sage Foundation, New York.

the period of interest in social and economic problems, it was never far outside the case worker's scope of interest. Mary Richmond said that "treatment demands for success an understanding of 'character-ology'" but added that "no satisfactory body of data yet exists"[23] through which that understanding can be secured. Even as she wrote, however, a movement was under way which would supply this needed body of data and, in doing so, would increase the social work task so greatly as ultimately to force a reconsideration of the whole system.

The interest of various professional groups in problems of personality had been growing for many years. The child study movement in the United States had been initiated by G. Stanley Hall in the 1880's. Interest in problems connected with the psychology of sex had been aroused by Havelock Ellis, Krafft-Ebing, and others preceding and associated with Freud. Educational reformers laid the basis for what was later called the child-centered school. Psychologists and biologists had long since discovered the Jukes and their reputedly bad heredity, and in the early decades of the 1900's the I.Q. and its concomitant abilities were being tested. Psychiatrists emerged from their dissecting rooms and custodial institutions to take an interest in mental hygiene and the problems of everyday living. In general, by the time of the first World War and the postwar prosperity, the basis was well laid for a shift of interest in social work, as in other professions, from environmental to psychological problems.

The immediate factors turning social workers' interest in that direction were the establishment of the Home Service divisions of the American Red Cross during the war and, more specifically, the development of psychiatric social work. Social workers from the charity organization societies were engaged to administer and supervise the work of relief and family service which the taking of many men out of family life for military duties necessitated. Home service divisions were set up in almost every county in the country (some 15,000 offices at the height of the plan), with the result that social workers were brought in touch with people and problems foreign to their usual clients. In addition, the basis of contact with these new clients was different. The last remnants of that old attitude of the socially superior ministering to the needs of a socially inferior group had to disappear, for these Red Cross clients were a cross section of the total population of the country and their needs were those which many other families had escaped only by accident. Then, too, in this "case work above the

[23] Mary Richmond, *Social Diagnosis, op. cit.*, p. 56.

poverty line" the desires of the clients had to be kept in mind, for the very existence of the agencies was dependent upon giving satisfaction.[24]

These facts led to a democratizing of social work—an elimination of that social distance which characterized ministering to the poor; and they also forced social workers to search for more understanding of clients' psychological motivations, for neither character defect nor environmental pressures provided adequate explanation of the differences in response that were found when the case workers' services were offered.

Home Service for civilian families was a short-lived enterprise, but much of the point of view there developed was taken over into the work of family welfare agencies, which increased rapidly in number after the Red Cross program was given up. The name of the American Association of Societies for Organizing Charity was changed in 1919 to the American Association for Organizing Family Social Work (and later to the Family Welfare Association of America), indicating that family welfare had supplanted charity and that "service" rather than financial relief was the agencies' chief interest. This latter was a point much discussed during the 1920's, and agencies pointed with pride to the fact that as many as half of their clients were not receiving financial assistance from them.[25]

Interest in the psychological aspects of clients' problems was greatly strengthened by the development of psychiatric social work. This, too, was a wartime product, an outgrowth of psychiatry's discovery of the social, environmental factors in the neuroses and other personality deviation which became more pronounced under the stress of war. Before the war a few social workers had been employed in mental hospitals to help psychiatrists secure information about the social aspects of patients' lives and to arrange for the care of patients after discharge. The war greatly increased the need for such workers, for shell shock and other such conditions were recognized as neurotic ailments; and under the stress of war conditions much more responsibility for direct work with patients was given to social workers than

[24] Virginia Robinson, *A Changing Psychology in Social Work*, University of North Carolina Press, Chapel Hill, 1930, p. 53.

[25] Surveys of the three largest New York City family agencies in 1928–29 showed that from 41 to 48 per cent of their clients were not in receipt of financial assistance from these agencies. Many of the clients, however, received support from other philanthropic sources, so that the conclusion, often drawn, that the agencies were serving a large number of financially independent people was not justified.—Philip Klein, *Some Basic Statistics in Social Work*, Columbia University Press, New York, 1933, p. 55.

had previously been the case. By 1920 psychiatric social work was a well-established specialty of the social work profession and was exerting great influence on all branches of case work.

Now what was it that social workers learned from their association with psychiatrists and from their work with neurotic and psychotic patients? And why and in what ways did this new knowledge alter family welfare work? To answer those questions adequately would take much time, but we must make an attempt to state a few of the basic principles and their implications for case work in general; otherwise, the present-day practices of case workers are incomprehensible.

Perhaps the most important fact that case workers learned from psychiatrists (who themselves did not so much discover it as develop its implications) is that each individual's behavior is the resultant of a lifelong series of events outside and inside an organism that is continually choosing among them, reacting to them, and being shaped in the process. Among the events, those which represent interpersonal relationships are of chief importance, particularly the relationships in which the individual is first involved, usually in his own family. It follows, therefore, that an individual's mode of behavior is not something deliberately chosen, the result of a conscious decision to act in a given way, but is rather a response to needs that have a long history and that are inextricably bound up with his whole existence. In other words, behavior is meaningful. It is no accident that one person reacts to a given situation in one way, and another in another. Whether a man behaves in a socially acceptable or unacceptable manner, there is a reason for his behaving as he does; and, moreover, the way he behaves has value to him, since it represents his solution of a possible conflict between his desires and the demands of the outside world.

These facts would seem sufficient in themselves to indicate that attempts to alter the behavior of others would encounter great difficulties, but the research work of psychiatrists and psychologists resulted in a theory that made such attempts seem even more difficult. This theory maintains that the motivations for much of human behavior are unconscious, that frequently people are not aware of why they act as they do. Individuals can give reasons for their behavior, but these are often rationalizations for motives that they conceal from themselves and from others. The intellect is, of course, a powerful force in determining upon and controlling behavior, but the intellect

does not work in isolation from the emotions, which sometimes direct its activities and at all times give intensity to its decisions.

These findings and their corollaries revolutionized psychiatry in the first quarter of the twentieth century. The genetics of human personality had been discussed by psychologists in earlier years, and the doctrine of psychic determinism had found fairly wide acceptance, but the discoveries regarding the unconscious motivations of much of human behavior and the importance of early experience (especially those growing out of parent-child relationships) in determining lifetime modes of adjustment were upsetting in the extreme. In their absorption in following out the implications of these discoveries for their own work, psychiatrists somewhat neglected certain other findings of the new psychology; and social workers, overwhelmed by the revelations that were obviously of such importance for their work, drew heavily upon current psychiatric theory and tried to adapt their methods to its teachings.

Influence of Psychological Orientation on Family Case Work

The work of family welfare agencies was modified only slowly by this new point of view. Throughout the 1920's most family case workers were absorbed in refining the techniques of investigation and analysis of problems that had earlier engaged their attention. The development of the implications of the psychological theories for case work was carried on largely in child guidance clinics. In both clinics and family agencies, however, the first effect of the psychiatric discoveries was that of increasing the number of facts social workers thought they had to secure in order to understand adequately the problems and needs of their clients. The more they learned about human psychology, however, the more difficult their tasks appeared to be. As Grace Marcus wrote in 1929, the difficulties of establishing "accurately and comprehensively the nature of the material difficulties . . . do not compare with those encountered in attempts to penetrate the hidden, essential core of the case which resides within the personalities of the clients."[26] This search demanded not only more knowledge and skill than the majority of case workers could have

[26] Grace Marcus, *Some Aspects of Relief in Family Case Work*, Charity Organization Society, New York, 1929, p. 23. For her later point of view on this matter see "Changes in the Theory of Relief-giving," *Social Work Today*, VIII (June–July, 1941), 1–9, 29.

but also more time than could be allotted to the average case. Family agencies therefore began to add psychiatric social workers to their staffs to supplement family workers in difficult cases, and to consider the possibility of limiting their intake to families whose problems were not too much complicated by emotional maladjustments.

Another effect of the new knowledge was to force family case workers to relinquish what had been one of their main tenets: that the family is the unit of their work. Betsey Libbey had voiced in 1924 the predominant opinion when she said: "The family—the problems that are common to all its members, their relations to each other, the needs of each of them individual by individual—this is the field of the family agency. The approach to problems that are individual is indirect through the problems that are common to all. It is some combination of circumstances that is affecting every member of the family that brings the family case worker into the situation." [27]

This point of view could be maintained as long as family case work was conceived as being concerned chiefly with bringing families into effective relationship with other organized groups in the community: that is, when ignorance, neglect of duties, and lack of material resources were regarded as the main factors hindering social adjustment. But when the importance of psychological factors became recognized, a subtle shift occurred in the whole basis of family case work, and individuals rather than families came to be regarded as clients.

The change is seen first in the increase in interviews with family members, for psychiatrists taught that knowledge about the motives and desires of particular individuals can be best obtained from the individuals themselves. To get to know all the members of a family intimately took too much time, however, so that the next step was to concentrate attention on the key persons in a family or on those whose problems were most obviously related to the family's difficulties. Then, as the implications of the teachings of psychiatry were made clearer by this close acquaintanceship with the attitudes and feelings of individual clients, case workers came to realize that in order to rehabilitate families they would have to find some means of freeing the emotionally disturbed members from their mental conflicts. Otherwise these clients would continue to behave in their irrational manner, and the best-laid plans for family rehabilitation would go for naught.

[27] Betsey Libbey, "Case Work in a Family Agency," *Proceedings of the National Conference of Social Work* (1924), p. 321.

This realization ushered in the era of "therapy" in family case work. Other services—such as effecting contact with other community agencies, providing financial assistance, giving advice about child rearing and household management—were continued; but they were often regarded chiefly as means of reducing environmental pressures that were creating or enhancing the client's emotional difficulties. Interest in "direct treatment" of personality problems increased rapidly, and numerous techniques were developed for bringing about personality change so that the "economic and personal independence of clients" [28] could be secured. There was, in fact, a time when it was hard to distinguish certain kinds of case work from psychiatric treatment, and some psychiatrists began to feel that they had taught case workers too much!

In this phase of the development of family case work several features are to be noted. One is the continuation of the old objective of total rehabilitation. Charity organization workers had always sought all-embracing and permanent solutions to family difficulties. Before the advent of psychiatry into case work, these had seemed relatively easy to obtain for clients who would co-operate with the agency workers, especially if defects in the general economic and social system could be remedied by legislative measures. Knowledge of the dynamics of human behavior made case workers more aware of the difficulties of such endeavors, but it also provided them with new tools with which previously encountered impediments to the total rehabilitation of clients might be removed. Consequently, instead of narrowing the objectives, the first effect of the introduction of psychiatric methods into family case work was to broaden them, with the result that case workers gave much attention not only to removing the hindrances to effective family life but to developing the capacities of all family members to the fullest.

Another closely related feature is that of the area to be covered by a family welfare agency. It was noted above that charity organization workers had conceived their services as covering all aspects of the life of a family—employment, health, recreation, education, and so on. The family agencies, under the influence of psychiatric teachings, continued to maintain this aim and attempted for a time to be

[28] This was stated by Grace Marcus in 1929 as the "desired end" of family case work. *Some Aspects of Relief in Family Case Work, op. cit.*, p. 70. *Cf.* her later article, "Social Case Work and Mental Health," *The Family*, XIX (1938), 99–105.

all things and to do all things for all people. In pursuit of this objective some of the agencies during the 1930's included in their programs such services as psychiatric treatment, child guidance, day nurseries, therapeutic play groups, parent education, and vocational training and guidance. The only service that they attempted to do away with was that of financial assistance. The great increase in public assistance services during the economic depression of that decade in large part occasioned these changes, but it is only the psychological orientation of social case work that explains their direction.

Opposing this trend, however, was another that had to do with the focus of case work treatment. In earlier days, as has been noted above, family case work was not so much concerned with intrafamily difficulties as with those which affected a family's relationships with other organized groups—schools, hospitals, employment agencies, and the like. Now, with interest in dynamic psychiatry concentrating the attention of case workers on personality and personal relationship problems and on the emotional aspects of external hazards to family life, there was a tendency among family case workers to center their efforts upon fostering or preserving intrafamily harmony. Margaret Rich, for instance, in describing family case work before an international conference in 1935, said that it consisted of "remedial and preventive treatment of social and emotional difficulties that produce maladjustment in the family," and she listed the kinds of difficulties that bring families to the attention of agencies (marital friction, economic strain, illness and death, and so on) in terms of the emotional disturbances which they produce.[29]

This shift from the outer to the inner aspects of family life made possible the narrowing of the objective of family case work from that of total rehabilitation to that of helping to remove the difficulties that keep family members from making good use of the organization (the family) to which they belong. Actually, the objective has not been stated in those exact terms, but the most recent developments in family case work suggest that some such change in thinking is taking place. Several factors are involved in this alteration of perspective, chief among them being an increased knowledge about certain aspects of human psychology and a deepened understanding of the place of social work in the total social structure.

[29] Margaret Rich, *Current Trends in Social Adjustment through Individual Treatment,* Family Welfare Association of America, New York, 1936, pp. 1, 4.

The Present Philosophy of Social Case Work

In social workers' (and to some extent psychiatrists') early enthusiasm over the discoveries about the unconscious elements in human behavior, the lifelong effects of early emotional experiences, and the inhibiting character of mental conflicts, certain other teachings of dynamic psychiatry were more or less lost sight of. The fact that each individual represents a unique combination of traits and experiences should have warned those who would rectify human behavior that there is no one best mode of life and that, regardless of how effectively mental conflict is relieved, people will respond differently to similar situations. Similarly, the teachings of dynamic psychiatry—that each individual develops ways of dealing with the problems of life, that he has much endurance and capacity for adaptation, and that there are conscious as well as unconscious elements in his control over his activities—should have given pause to those who would take over responsibility for planning human lives. Close study of the psychological aspects of clients' problems brought these facts increasingly to the attention of case workers, and psychiatrists also began to give more emphasis to them in their teaching and writings. Both professional groups came to realize even more clearly that each individual has his own peculiar way of handling his difficulties, that he has his own peculiar strengths, and that there is no such thing as that much-discussed "perfect adjustment."

In consequence of the growing recognition of these facts, very important changes took place in social work, both in family welfare agencies and in other fields.[30] Social workers began to renounce the aim of rehabilitating clients so that they would be able to function in an entirely satisfactory manner, and to relinquish responsibility for making plans for clients and for guiding their lives. Instead of total rehabilitation, and all that that implied of need for case workers to carry on a kind of psychotherapy, the chief aim of social case work is now stated as that of helping people to mobilize their capacities for the solution of the problems that brought them to the attention of social agencies. The specific services to be afforded are not very different from those earlier made available. The difference lies in the

[30] In this chapter we have traced the development of social case work largely by reference to the work of family welfare agencies, because the historical sequence is best shown there. As a matter of fact, however, much of the working out of the implications of dynamic psychology for social case work was first accomplished in other kinds of agencies, especially in child guidance clinics.

case worker's attitude toward the client and his problems, and in the effect that attitude has on freeing the client's constructive capacities. Bertha Reynolds, one of the chief experimenters with these new methods, named the concept a "philosophy of self-determination for clients" and contrasted it with case work that "takes a parental attitude."

> One outstanding difference seems to be that [these case workers] have ceased to make themselves *responsible* for the social betterment of their clients. They do not guarantee anything, as if, indeed, they were powerful enough to make desirable changes come to pass if only they exerted themselves enough. Stated thus baldly, it seems incredible that one would ever believe that they could, but . . . there has always been an undercurrent of self-accusation and guilt [among case workers] if clients were not demonstrably better off for their ministrations. . . . By and large there has been widespread in the community a belief that there is *some* solution for every ill, and that those who set themselves up to help their fellow men are negligent if they do not find it. . . .
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> Scientific training tends to dissipate this sense of responsibility for outcome. First, there are the stubborn facts which no amount of wishful thinking can alter—the effects of heat and cold, or nourishment or the lack of it upon living organisms, . . . the ineffaceable marks of early experiences on personality. . . . Social case work cannot undo, any more than medicine can, the effect of mass starvation or the paralysis of creative ability. Social case work as such has no power to set straight social conditions nor to provide escape from their consequences.
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> In addition . . . social case workers cannot guarantee the response they will receive from other human beings. Indeed the attempt to do so itself raises barriers of resistance [which prevent case worker and client from progressing] toward a common goal.[31]

In the years that have passed since this concept was formulated, "self-determination" has become more and more widely accepted as a social work principle applicable in all fields of the profession, and various corollaries having to do with the social worker's part in the social treatment process have been worked out. It is now recognized that social agencies are set up to provide assistance against certain definite contingencies and that there are definite kinds of help that any particular agency can give. An applicant for service from an agency comes with certain problems that may or may not lie within

[31] Bertha Capen Reynolds, "Between Client and Community: A Study of Responsibility in Social Case Work," *Smith College Studies in Social Work*, V (1934), 98–99.

the field of the agency's services and that the client may or may not want to solve in ways that are consonant with the agency's purposes. One of the most important parts of case work is that which has to do with the exploration by client and case worker of their field of mutual interest—their attempt to see whether the services the agency is equipped to render are those which the client can use for the solution of his difficulties.

Since most of the services of a social work agency are not tangible commodities, this process of exploration does not bear the resemblance to a commercial transaction that this description might imply. Rather, it is a joint discussion about the nature of the client's difficulties, his conception of how they may be dealt with, the part he will play in their solution, and the assistance the agency can give toward that achievement. Among the case worker's objectives are those of revealing and stimulating the client's sometimes only latent ability to deal with his problems, and of using the resources of the agency (money, knowledge of other community services, advice, and counseling) to help the client in that endeavor. For the continuing purpose of social work, even now when it is recognized that people's lives cannot be made for them, is "not only to help those troubled in their immediate present but to help in such a way that each client will, from this experience, be better able to meet future difficulties with a more effectively organized personal strength." [32]

Suggestions for Further Study

Breckinridge, Sophonisba, *Family Welfare Work in a Metropolitan Community: Selected Case Records,* University of Chicago Press, Chicago, 1924.

Case records illustrative of the wide variety of problems with which family welfare agencies dealt in the 1920's and earlier and of the methods used at that time.

Devine, Edward T., *When Social Work Was Young,* The Macmillan Company, New York, 1939.

An account of the principles and activities of the New York Charity Organization Society in the early days.

[32] Helaine Todd, "Relief and Relief-giving," in *Defining Family Case-Work Services in Relation to Client Applications,* Family Welfare Association of America, New York, 1938, p. 4.

Devine, Edward T., and Lillian Brandt, *American Social Work in the Twentieth Century,* Frontier Press, New York, 1921.

A description of American social work in the early 1900's.

Lowrey, Fern, "Current Concepts in Social Case Work Practice," *Social Service Review,* XII (1938), 365–73.

A clear statement of the concepts currently accepted as basic in social case work.

Marcus, Grace, "The Generic and Specific in Social Case Work," *Newsletter of the American Association of Psychiatric Social Workers,* VIII, No. 1, pp. 3–9.

An analysis of the common elements in case work as practiced in all types of agencies and of the reasons why it is necessary that each type of agency define the particular services it has to offer to clients. The writer describes the tendency among case workers to want to deal with all aspects of a client's life and shows why this is an untenable objective.

Queen, Stuart Alfred, *Social Work in the Light of History,* J. B. Lippincott Company, Philadelphia, 1922.

A historical analysis of the development of social work as a response to changing social and economic needs.

Reynolds, Bertha Capen, "Re-thinking Social Case Work," *Social Work Today,* Vol. V (1936).

A critical evaluation of the basic concepts of social work: their historical development and some of the sociological factors associated with them. An excellent, brief analysis of the subject, leading to a plea for applying the accepted case work philosophy to the solution of wider social problems.

Rich, Margaret, *Current Trends in Social Adjustment through Individual Treatment,* Family Welfare Association of America, New York, 1936.

A statement of the basic purpose of social case work agencies as conceived at the present time and a discussion of some of the ways in which it is translated into practice.

Richmond, Mary, *Social Diagnosis,* Russell Sage Foundation, New York, 1917.

A treatise on social case work. This book held the position of undisputed authority for at least ten years and is still regarded as the basic statement of principles by a large section of the social work profession.

Robinson, Virginia, *A Changing Psychology in Social Work,* University of North Carolina Press, Chapel Hill, 1930.

Chapters I to VIII trace the history of changing concepts in social work. The rest of the book is concerned with showing the implications of dynamic psychology (particularly the contributions of Otto Rank) for social case work.

Social Case Work: Generic and Specific, American Association of Social Workers, 1929. (130 East 22d Street, New York.)

Attempts to show what are the generic elements in social case work: field, objectives, vocational resources, and methods. Compare with article by Grace Marcus, above.

Watson, Frank Dekker, *The Charity Organization Movement in the United States,* The Macmillan Company, New York, 1922.

The most detailed account of the origin and growth of the charity organization movement in the United States. There is little of critical evaluation in it, however, for the author was apparently convinced that social work had reached full maturity by the time he wrote his book.

Chapter IX

THE ORGANIZATIONS THROUGH WHICH SOCIAL WORK IS CARRIED ON

Our investigation into the nature of social work has brought us to the point where it is quite clear what the main function of social work is and what individual and social requirements called it into existence. It has been shown that social work consists of a highly organized system of activities carried on by specially designated individuals in accordance with rules and under a charter and by means of a material apparatus. These activities were originally called into existence by the need—in the interest of both individual and social well-being—to find a way by which the pauperizing effects of poor relief (particularly the indiscriminate giving of alms) could be avoided. Improved administration of public welfare, effective organization of community resources, reform of social conditions, and work with individuals so that they would not have to resort to charity were the means originally proposed to that end. The administrators of public welfare enterprises, legislators, and citizens at large, however, did not entrust to the newly organized social workers the management of the social institutions through which poverty is relieved and economic sufficiency secured. Social workers were therefore forced to reconsider their aims and to devote most of their attention to enlarging their theory and improving their skills in service to individual clients.

In that work it became increasingly clear that it was not only in relation to poor relief and to family life that some individuals needed help in order to make the most effective use of what social organization has to offer. Some needed the counseling services of social workers and their help in mobilizing resources before they could make their best use of the services of schools, hospitals, recreational organizations, foster homes, or institutions. Others had difficulties that stood in the way of their doing well in occupational groups or of being co-operative members of a community. That social workers could be of use to

individuals in these social relationships was sometimes first recognized by members of other professions, who saw in social work's methods of investigation, planning, and organization of resources a means of making their own services to their charges more effective. In consequence, social work gradually broadened out from its original objective, which is now seen to be but a special case of its generalized function, and took as its province the providing of help to individuals in overcoming the obstacles to using any particular social institution.

In carrying out that function nearly all social workers operate through organizations [1] rather than as individual practitioners. Some of these organizations are wholly devoted to social work, while in others social workers carry on their activities in furtherance of a wider program. With the exception of the absence of private practice, this situation is no different from that of other professions. Physicians, for instance, may be attached to a hospital, an organization devoted wholly to their professional objectives; or they may be employed by schools, courts, or other organizations to carry on their professional activities. Likewise, engineers operate both as staff members of engineering companies and as, for instance, employees of a city government.

In addition, the effective discharge of the main function of social work has necessitated the development of subsidiary or auxiliary social work activities that are sometimes carried on by independent organizations. Among these activities are those of community organization, social work planning, research, over-all administration, and others that are directed toward making work with or on behalf of individual clients possible. All of these must be taken into consideration, therefore, when we attempt to describe how the social work function is actually discharged.

Various attempts have been made to classify the kinds of organizations through which social work services are offered to the public,

[1] These organizations—family welfare societies, child-placing organizations, for instance—are themselves social institutions in the sense in which we have been using the word. That this is so does not in the least invalidate the concept that social work is itself an institution. Society consists of unnumbered institutions, and individuals play their parts in many of them at the same time and even in the same capacity—as when, for instance, a social worker is a member of his general occupational group, belongs to both the American Association of Social Workers and a trade-union composed of members of his craft, and is on the staff of a family welfare organization of a particular city. Since it is through the latter type of institutions that the services of social workers are chiefly made available, these organizations must be described if we are to arrive at a clear understanding of how the social work function is discharged.

but no really satisfactory system of co-ordinate categories has been devised. The reason is to be found in the situation itself. Social work services are not organized on any one basis. Sometimes the reason for organization is stated in terms of the persons to be served; sometimes in terms of the kind of service to be rendered. Examples of the first are seen in agencies whose services are directed toward children, the aged, the foreign-born, travelers, physically handicapped individuals, homeless men, adolescents in need of protection, migrants, and so on. Examples of the second are agencies which offer consultation about family problems, child guidance, child placement, and financial assistance. Again, organization may be based upon the institution in connection with which social work services are afforded (as social work in schools, hospitals, courts, correctional or custodial institutions); or it may encompass geographical areas, as is the case with rural child welfare services. As has been noted earlier, social work is sometimes the sole concern of an organization (in which case it is unquestionably classified as a "social agency"); sometimes the organization combines social work activities with those which are recreational or educational in nature; sometimes—as in the case of schools, hospitals, and perhaps even financial assistance organizations—it uses social workers to facilitate certain aspects of its own work.

All of this probably confuses the orderly mind of a research worker more than that of the lay observer, who is usually quite willing to accept things as they are and is not bothered by society's lack of logical arrangement! We shall therefore not concern ourselves further with this matter of classification, other than to note that it does not seem feasible to analyze the way in which the function of social work is fulfilled by describing the different types of social work agencies or departments, for they are too overlapping and too subject to the exigencies of time and place to provide a satisfactory basis for an analytic account.

Nevertheless, these agencies and departments cannot be dismissed, since they are the structure through which social work operates. Moreover, when attention is paid to the manner of their organization rather than to their purposes and clientele, it is found that they have much in common, and that their structure is intimately related to their function and can be understood only in terms of it. We shall accordingly devote this chapter largely to a consideration of the structure through which social agencies and departments typically operate, and

then, in later analysis, pursue the question of how through this structure the function of social work is carried out.

In spite of the difficulties and the inexactness involved, such an objective requires some classification of the organizations affording social work services, for even a slight acquaintance with them reveals that their structure varies considerably. We shall therefore group the agencies and organizations under the following headings, with full awareness that they may not include all types, or be equally applicable in all communities: (1) organizations devoted primarily to giving social work services directly to clients; (2) organizations affording both social work and other services; (3) social work departments of organizations whose primary service lies in another field; and (4) organizations giving service to other social agencies.

Cursory examination will show that the individual agencies grouped under these headings are themselves social institutions according to the criteria we are following. Their personnel and activities are organized. They operate in accordance with a body of ethical, legal, and technical rules—partly written, partly traditional—which sets up norms for their activities. They have a material apparatus whose form is necessitated by the services they render. They perform a function both in relation to their individual clients and in relation to the social structure as a whole. Here our aim is to present a picture of the typical setup of these agencies as they exist in most American communities so that the reader will have some idea of the structure through which their services are carried on.

Organizations Primarily Engaged in Social Work with Clients

In the light of the argument of previous chapters it will be recognized that it is possible to dispute what sorts of agencies should be included in this first category. There would be no disagreement, however, that family welfare agencies, child placement or children's aid societies, travelers' aid organizations (when they provide something more than information services), and societies for the prevention of cruelty to children are primarily engaged in carrying on social work, and that organizations providing financial assistance to persons in need are usually regarded as being in this category. From the point of view of personnel, these kinds of organizations are distinguished from others to be described below in that their professional staffs—aside from executive and administrative officials—spend most of their

time in helping individual clients with the problems they encounter in relation to particular social institutions: in providing for the maintenance of their families; in dealing with other problems of living together in family groups; in "finding their way around" in an unfamiliar community and securing needed services; and so on, as has earlier been described.[2]

Within this category, however, a differentiation must be made between what are commonly called private agencies and those of a public character. The first are the agencies whose financial support is derived from endowments, trust funds, the contributions of religious or fraternal organizations, or (and these probably form the largest group) from voluntary contributions periodically solicited. The second are those whose structure, as Sophonisba Breckinridge points out, is authorized by law and that are supported by taxation. This is not to say that the law has no jurisdiction over the private agencies. Many of them are incorporated, certified, inspected, regulated, or standardized in accordance with legal enactments, but the selection of their directors is not entrusted directly or indirectly—as is the case with public agencies—to the legislature.[3]

The difference in source of direction and financial support does not necessarily change the character of the services rendered (children, for instance, may be placed and supervised in foster homes in accordance with the same body of case work rules and values regardless of whether the money comes from public or private sources); but it does alter certain aspects of the structural setup of the agency and the nature of its relationship with its clients. In the following analysis, therefore, a distinction between these two types of agencies must be maintained.

Private agencies

Private social agencies are largely confined to urban centers; the larger the city the greater is likely to be the variety in types of agencies

[2] The contrast with the activities of the majority of the members of the professional staffs of schools and hospitals is too obvious to mention; but it is worth noting that in settlement houses, child-caring institutions, homes for the aged or for unmarried mothers, organizations like the Red Cross or the Urban League, and others which are commonly regarded as social agencies, many staff members have duties which are quite different from those which we have concluded belong peculiarly to social work. Necessarily, then, the structure of these latter agencies is different from those that are included in this first category.

[3] For a further discussion of this point, which is made by Arthur C. Millspaugh, see his book, *Public Welfare Administration,* The Brookings Institute, Washington, D. C., 1935, p. 76.

and the greater their specialization in services. Some few of these organizations provide county-wide or even state-wide services, this being particularly true of child-placing agencies, but for the most part the fact that private agencies draw their financial support from local communities confines their activities to those centers. The result is that rural areas, as judged by urban standards, are undersupplied with social work services, a fact that has led recently to the extension of state- and federal-financed social work in them.

The historical background of private social agencies devoted to work with individual clients will be described in subsequent chapters. Many of these agencies, especially in cities on the eastern seaboard, have been in existence for a long time and have had many changes of objectives and policies. Typically, they originated in bequests by persons who regarded some particular category of individuals as being especially in need of help (the orphans of sailors lost at sea, the children of slum areas who seldom saw grass or breathed fresh air, paupers who could be restored to self-sufficiency if they were given friendly guidance); or they were set up by groups of people who solicited funds for such unmet needs. This recognition of needs and of lack of means on the part of individuals or the community to meet them still supplies the incentive for the establishment of social agencies. The Junior League of a city may, for instance, hear about child guidance clinics, and, looking over the situation with respect to juvenile delinquency, truancy, feeble-mindedness, and the difficulties parents encounter in child rearing, come to the conclusion that a clinic is just what their town needs. Similarly, an unorganized group of interested citizens may become concerned about the problems of illegitimate parenthood, family disorganization, or unmet needs for financial assistance, and decide to raise money and set up an agency for providing the required services. The chief difference between the situation now and in much earlier times is that present conceptions of needs are wider and the advice of national organizations (such as the National Committee for Mental Hygiene, the Family Welfare Association of America, the Child Welfare League of America) is available for assistance in planning, organizing, and setting standards of work for the contemplated agencies.

Once determined upon and the sources of financial support canvassed, such agencies are usually organized under a constitution and bylaws and may be incorporated. Their management is entrusted to a board of directors, composed typically of prominent people in the

community who are interested in the work, whose financial or professional status will testify to its worth-whileness and integrity, or who can be influential in securing funds for its continuance. There has been some slight trend in recent years to include on boards of directors representatives of labor or consumer groups, not only to avoid the appearance of patronizing, class-conscious attitudes on the part of the board, but to widen its perspective on the social conditions and needs that have called the agency into existence. Once chosen, boards are likely to be self-perpetuating, at least in the sense that they nominate and elect their own members, even though it is usually for a limited term of office.

The general management of private agencies is usually entrusted to committees of the board of directors. These, traditionally, are executive, financial, and nominating committees, and one that has supervision over buildings and maintenance. In addition there are usually standing committees on personnel practices, interpretation and community relationships, and general agency policy. In addition, many agencies have "case committees"—a survival of the days in which the board members made the actual plans about the way in which work with individual clients was to be carried on. This committee, as well as the other standing committees, is customarily composed of representatives of both the community and the professional staff of the agency. Its purpose has changed from that of directing case work activities to that, among others, of being the means through which the board and the public are kept acquainted with the character and progress of the work which they support.

The day-to-day work of social agencies of the type here under consideration is carried on by an executive chosen by the board and a staff of social workers, aided by such professional and technical assistants as the work of the agency may require. To the latter category would belong psychiatrists engaged on a part-time basis for advice and consultation, physicians, psychologists, nutrition experts, and others whose services are required only occasionally or in connection with only certain aspects of the clients' problems. If the agency is large, it may be set up on a district basis with subexecutives in charge; and even if it is rather small, the social work staff is likely to be composed of one or more supervisors with a group of case workers under their direction.

This customary plan of having supervisors and subordinate case workers rather than a group of co-ordinate practitioners is apparently

attributable to at least two factors. On the one hand, there is the difficulty of maintaining similarity of policy and practice (particularly where the disbursal of funds is concerned) in a field in which subjective values and judgments necessarily play so large a part; on the other, there is the fact that training schools for social work equip students only partially for the discharge of professional duties, and much must be taught the beginning worker after he enters upon a job. In this connection it is to be noted also that many social workers are still trained by the apprenticeship method (that is, in an agency rather than in a professional school), which was once the universal means of social work instruction, and that the system of having supervisors is to some extent necessitated by that situation. One bad effect of the system is that competent case workers are likely to want to become supervisors, for the sake of prestige as well as for financial reasons, and that consequently much of the face-to-face work with clients is left to the least well equipped of a staff. To counteract this, some agencies have recently begun basing salary schedules on competence rather than on position and confining supervision of mature workers to administrative rather than case work matters.

Once set up and a going concern, a private social agency secures its clients by means which vary somewhat with the purposes for which it was organized. Clients may be "referred" to it by other social agencies or by organizations (churches, schools, courts, "character-building" agencies) which come in contact with individuals who appear to be in need of the agency's services. Doctors, lawyers, and other independent practitioners may call the agency to the attention of their patients or clients. The agency may secure publicity through the press or radio or may enter upon an "educational" campaign to inform the public about the kinds of situations its services are set up to meet. Satisfied clients can be counted upon to tell each other about the agency and its services.

Workers in social agencies are becoming increasingly certain that they can do their most effective work with people who understand and want the kind of help they have to offer, and that usually little can be accomplished with those who are sent against their will or are under the impression that they will get something that the agency is not prepared to give. The idea dies hard (in both professional and lay circles) that, once in the hands of a social worker, a client can be led to desire what somebody else deems best for him; but this aspect of the "reform spirit" is no longer part of the profession's

theory. Even agencies that are engaged in what is called protective work—securing children against abuse and neglect—seek to understand the parents' motives and desires and to make plans that are in accordance with them, and they resort to court action only in extreme cases. All of this makes it increasingly necessary that the services of an agency and its limitations be clearly understood both by those who finance its work and by those (not necessarily a distinct group) who might seek its help for themselves or their acquaintances. Among the chief obstacles are the public's association of social work with difficulties occasioned by poverty and incompetence, and the belief on the part of rich and poor alike that to ask for aid in problems of daily living is a confession of weakness or failure. Such an attitude makes assistance of any sort—financial or otherwise—hard to accept and to utilize constructively; hence it is the continuing purpose of social workers to "interpret" by both precept and example the nature and the dignity of the service they have to offer.

Public agencies

Public agencies that engage in social work as their primary concern differ from private agencies in several respects, all of which influence their structure and, to some extent, the character of the work they carry on. Most obvious is the difference in source of financial support (taxation) and in the way they come into being (administrative or legislative enactment). Overlooked sometimes by the vigorous proponents of public social work is the fact that as they are at present constituted most public agencies engaged primarily in social work are set up to meet financial needs and to care for dependent or neglected children.

This fact brings up the question, earlier raised, as to whether the giving of financial assistance or the providing of foster care is necessarily social work. This is not the place to answer that question fully, but it must be emphasized that in describing the agencies through which social work is carried on we do not mean to imply that all agencies of these kinds are engaged in social work. This point applies to private as well as to public agencies and is called to attention here to offset the possible impression that by dealing with problems of poverty these agencies are *ipso facto* doing social work.

These public agencies are a part of the public welfare system, broadly defined. Public welfare is a much disputed term, which logically should cover a wide area and in fact in the United States

today has a rather restricted meaning. Kelso [4] points out that originally laws about health and educational activities were regarded as "detached, impersonal regulations of the rights and duties of free, self-propelling individuals," while "where governments touched the person to control him, to take custody of his body, to feed, clothe and house him, they thought of punishment or of charity and lumped the two together" as public welfare. Perhaps the thought underlying this was that governments were thereby protecting the welfare of the public from these dangerous classes! Although recent years have witnessed a great change in the legislatures' concepts of poverty and dependency, departments of public welfare still characteristically deal with people without adequate income for their support, with delinquents, and with those who are mentally ill or incapacitated; and they are not entrusted with all the activities that promote the public's welfare.

As a matter of fact, from the point of view of social institutions, this practice does not have the faults that are sometimes attributed to it by those who take the words "public" and "welfare" at their face value. It will be seen that the departments deal with what is in a sense a single problem, in that they are concerned with people who are not adequately encompassed by the usual institutional arrangements of society. In doing so they lump together incongruous groups: those whose physical needs are not adequately supplied by their families or by the economic system, and those whose behavior is such a threat to social organization that they must be taken into custody for their own and other people's good. For many years the trend has been toward separation of these groups, and the present organization of public welfare services is such that most persons suffering from lack of adequate financial resources are separately provided for. Nevertheless, the administration or supervision of the services to people who fall outside the usual institutional arrangements of society is frequently entrusted to one authority.

This is particularly true at the state level of organization. State boards of public welfare or their equivalent are in existence in all states, but there is little uniformity among them. Some state boards are administrative, with control over even such minor details as the purchase of office equipment and the planning of schedules, while others have only supervisory powers which are so limited in practice as to be almost negligible. Between the two are strong and effective

[4] Robert Kelso, *The Science of Public Welfare,* Henry Holt and Company, New York, 1928, pp. 127–28.

boards which combine supervisory and administrative functions in a way that pays due regard to the needs of the various individual institutions and agencies under their charge. Beyond that it is difficult to generalize, for the picture of public welfare organization in the United States is one of utmost diversity. None of the state systems is identical with another, either in scope of activity or type of organization. In addition there is variation from city to city and from county to county within a state, so that it is almost impossible to describe in useful terms how the work is typically carried on.

It is a fact, however, that every state has a department or a division of a department that administers or supervises the public assistance services to which the federal government makes a contribution—aid to the aged, to the blind, and to dependent children. This work may be centered in the state department of public welfare; it may be conducted by a separate department which confines its activities to these programs; or it may be combined with other services, such as the social insurances and the general child welfare program, under a department which is separate from that of public welfare. This degree of uniformity in organization at the state level is necessitated by the federal legislation governing grants-in-aid of the public assistance services, for according to these laws the services must be supervised by a state agency and must operate in all its political subdivisions.

In the local communities—which, of course, is where individuals in need of help seek assistance—there is considerable uniformity in the organization of the services to which the federal government makes a contribution, but otherwise there is much diversity. These services supported by the federal government are available locally either through branch offices of the state department or through agencies that are administered locally but supervised by the state. In the latter case the local administrative authority is likely to be a county or municipal board or some existing official body, such as the county commissioners or the juvenile court. In either case local offices are maintained and are headed by an appointed administrative who directs, with the assistance of supervisors, the activities of social workers or their equivalents. Uniformity in standards and practices throughout the state is secured through the work of state supervisors, who make periodic visits to the local agencies. In some local areas the programs for the assistance of various categories of handicapped individuals are carried on by separate administrative authorities, but the usual plan is to have them combined in one office.

Greater diversity occurs in the field of "general relief"; that is, financial assistance to presumably unemployable people who do not belong to any of the three categories for whose help federal money is available. If general relief is financed by the state, its administration is centered in a state department and is usually combined with the "categorical assistance" programs. If it is locally financed (as is frequently the case), its administration is likely to be in the hands of the local poor law boards, county commissioners, or other officials to whom the work of poor relief has been traditionally entrusted. Between these two types of organizations are various others about which it is difficult to generalize, but it may be noted that any financial contribution from a state to a local relief program necessitates a certain amount of state supervision.

The staff organization of these agencies is as varied as their administrative setup. When general relief is separately administered (and especially when its funds are derived largely from local sources), the old-fashioned arrangements of relying largely upon written applications, supported by the confirmation of such local officials as the justices of the peace, are likely to prevail. Under this plan, investigation is limited largely to determining the legality of the applicant's residence (that is, the responsibility of the local unit for his support), and no special staff for carrying on what could be regarded as even a semblance of social work is required. At the other extreme from this is the highly organized public relief agency of populous cities or counties in which there is a hierarchy of staff workers, ranging from "junior investigators" through supervisors to administrative officials and assisted by various kinds of special consultants, such as those who give the individual workers advice about how to deal with such problems as budgets, dietary needs, physical or mental disorders, and the personality difficulties of their clients.

Agencies that are partially financed by federal funds show somewhat greater uniformity, since they must be under state supervision and conform to certain federal standards. In them the diversity of staff composition is largely accountable for on the basis of the size and geographical distribution of the population to be served. Few of these public agencies, however, are wholly staffed by trained social workers, a fact which is attributable in part to civil service standards and in part to the scarcity of trained workers. This difficulty is partially obviated by training on the job and by the presence of trained "con-

sultants" who operate out from state offices and introduce an element of uniformity into local practice.

Child welfare services other than those of financial assistance (that is, provision of foster care, supervision of adoption, work with illegitimate children and those who are neglected, and case work services to children in their own homes) are usually locally carried on by agencies that are separate from those administering relief. These again may be branch offices of a state department devoted to these problems, or county children's bureaus may have charge of the work; or it may be entrusted to local committees of lay people. It is generally believed that this work calls for more case work service than does that which consists chiefly of financial assistance, and more attention has been paid to developing case work standards in this field. The federal Children's Bureau provides consultants to the states to which federal grants for the development of child welfare programs are made, and in some areas work of a high professional standard is being carried on.

Organizations Offering Social Work among Other Services

The organizations that engage in social work along with other activities are of several types. They are distinguished from our next category—those that utilize social work as an aid to their other activities—by the fact that they are generally considered social agencies and that their social work activities (in the sense in which we are using the term) are parallel rather than subsidiary to their other work. The clients to whom they offer social work services may be known to the agencies in another capacity (for instance, as members of a club in a settlement house), but this is not necessarily the case. They may, instead, come to the agency directly for help with the problem in question, it being an accepted fact that the agency offers this among other forms of service. In contrast, the social work that is carried on in organizations in the category to be described below is definitely auxiliary to their main work, which is that of teaching, providing medical care, or other health services, custody or physical maintenance, and so on.

Without attempting a complete listing of the types of agencies in this group, we may note the following as representative. There is, first of all, that large group that specializes chiefly in recreational and informal educational work. Settlement houses and such organizations as the International Institutes form a prominent part of this category,

as do the organizations classified as engaged in boys' and girls' work—the Scouts, Hi-Y clubs, the Y's and their equivalents. Settlement houses, as has previously been said, have a basic objective of developing neighborhood consciousness and leadership, and their whole program may, in a sense, be regarded as social work through the use of group methods. Many of their specific activities, however (clubs for various ages and sex groups, classes in numerous subjects ranging from child care to dramatics, folk arts, and speaking and writing English, athletics, and so on), clearly require other than social work knowledge and skills. Nevertheless, definitely social work services are provided by settlement houses—some of them case work services with regard, for instance, to family problems or to those of adjustment to American ways of life; others of a group work nature, such as the clubs that are set up to foster neighborhood consciousness or the ability to participate in organized groups.

The social work activities of the boys' and girls' work organizations and of the various youth programs are not so numerous as those of settlement houses, and many of the former should probably be included in the category in which social work is an aid to the main activities rather than co-ordinate with them. Some of these organizations, however (some large-city Y.W.C.A.'s, for instance) do have case workers on their staffs to give help to individuals who come to their attention even though they are not members of the organization; and the assistance offered often bears little relation to the rest of the organization's work with the individuals in question. Then, too, these organizations may carry on group work that aims at helping the group members with difficulties they encounter in other group relationships rather than at providing them with instruction or recreation.

A second type of organization included in the general category under consideration is that which offers both social work services and free or low-cost shelter and maintenance or other such forms of assistance. Such organizations tend to confine their work to certain specified groups. The Girls' Service Leagues, for instance, accept as clients girls who are in their adolescence and, for the most part, away from home. They provide low-cost residential clubhouses for those who are in need of no other form of service; vocational guidance, job placement, and case work and sometimes psychiatric assistance for those who want help with their problems of social adjustment; and "study homes" in which those who need special supervision and

guidance can live temporarily. The Hebrew Sheltering and Immigrant Aid Societies are another example of such a combination of case work and other services, their activities including meeting ships, providing meals and temporary shelter, finding jobs, giving aid with obtaining citizenship, and—to those desiring it—carrying on case work with regard to problems of adaptation to American life. The Salvation Army might be included in this group of organizations, though in most cities its case work services are decidedly limited; and some of the other organizations providing shelter for homeless men, transients, and others might also come under this heading.

The Red Cross is another organization that belongs in the category of agencies affording both social work and other forms of service. Its activities are so widespread as to make it unique among agencies. Its work in the field of nursing and in education with regard to accident prevention and care of the sick is well known, as is that which is concerned with disaster relief. In the latter program social workers are used to help individuals and families re-establish their connections with the outside world, draw up their claims for help, and otherwise reorganize their social existence.

Less widely publicized is the social work carried on by the Red Cross Home Service Division and under the direction of its "field directors" in military camps and hospitals. The Home Service Division was organized during the first World War to help soldiers and their families with the problems attendant upon the man's being away from home—keeping the lines of communication between them open, providing financial assistance, supervising the health and education of the children, and so on. Later it assisted soldiers who encountered difficulties in the transition from army to civilian life, and it has ever since provided assistance of various sorts to disabled war veterans and their families. In the present war, the Home Service Division is again active, and the Red Cross program of social work services in camps and hospitals has been revived.

A final group of organizations to be noted in this category are those that are mainly engaged in research, publicity, and general "interpretation" of the problems of special classes or social conditions. Some of these organizations, such as some branches of the Urban League and some local housing associations, provide the services of a social worker to individuals who seek help in regard to the kind of problems with which the organization is concerned.

To describe the structure and staff composition of these various

types of agencies would take us too far afield. Since most of them are privately financed—either by voluntary contributions, bequests, or both—their government is usually in the hands of an executive board, but the manner in which power is divided between national and local organizations (in those which do comprise more than one office) varies too much to permit generalization. More important for our present purpose is the observation that the duties and professional equipment of the staff members of these organizations range widely, depending upon the nature of the total work the agencies engage in. Teachers, recreation workers, nurses, doctors, lawyers, dietitians, housekeepers, and many others in addition to social workers are on the staffs; nor is the work of these various people carried on in order to facilitate social work, as is the case with that of the specialists in the agencies which were classified above as being primarily engaged in social work activities. On the other hand, social work in these agencies is not a service that is auxiliary to the main work of the organization, as is the case in the group next to be described. In these agencies, for the most part, social work and other activities are carried on co-ordinately with each other, and both promote the general purpose of the organization.

Organizations in Which Social Work Is Auxiliary to the Main Activities

The third category of social institutions through which social work is carried on is one that embraces a wide variety of organizations. Characteristic of this group is the fact that the social workers' clients are first known to the agency in another capacity (as pupils, patients, inmates, and so on), and the services of the social worker are usually sought in order that these individuals may be helped to make better use of the organization's facilities. In other words, the social institutions toward which the social work services are directed are the very ones by which the social workers are employed (schools, hospitals, and the like) rather than independent organizations, such as families or the economic system.

Many of the types of organizations that belong in this category are obviously engaged in something other than social work. Among these may be listed schools, hospitals, clinics, public health services, visiting nurse associations, courts, camps and other recreational organizations, employment offices and vocational guidance bureaus, and

public housing administrations. Others—chiefly by reason of the fact that their clientele is largely limited to people who have little money—are often regarded as social work agencies; but a brief inspection of their activities and main objectives will show that, according to our definition of the function of social work, this characterization of them is questionable. Among these are vocational rehabilitation bureaus; "sheltered workshops" for physically or mentally handicapped people; day nurseries; homes for the aged, blind, dependent children, chronically ill, and others; correctional institutions; and courts.

A few training schools for delinquents, institutions for the care of problem children, day nurseries which limit their intake to children with difficulties in social adjustment, and the like, may be regarded as being primarily engaged in social work in that all their services are directed to the end of helping their charges to overcome the difficulties that interfere with organized social life. By and large, however, these institutions are set up for child care, nurture, or education, and social workers are employed to facilitate the children's adjustment to the institution and to life in the community later. This point is not made in any disparagement of the work of these organizations. It is necessary that homeless and neglected children be sheltered and cared for; nor is there any reason to suppose that all such children present problems in social adjustment that would necessitate the institution's trying to be something other than a substitute for family life. It may be otherwise with the needs of most of the children who are sentenced to institutions as juvenile delinquents; but, however that may be, it is a fact that few "training schools" do more than attempt to provide the children with favorable home and community conditions within the institution. In these and other similar institutions social work is usually confined to securing social data about the children for the use of the administrators and others on the staff, and to furthering the children's adjustment to the institution and after leaving it through individual work with them and their families.

In organizations in which social work is auxiliary to the main function, social work is carried on by one particular department or by certain specified staff members. Within a department the hierarchy of authority and duties may be very similar to that in the agencies which are engaged in social work as a primary occupation (there may be the same distribution of supervisors, consultants, and case or group workers); but the final administrative direction and, to a large extent, policy making is likely to reside in a person (such as a hospital or

school superintendent) who is not a social worker. In other words, social work is not carried on within these organizations as an independent enterprise, under social work executives or administrators who are able to make their own plans and policies subject only to a board's approval. It is, instead, a service that is set up by persons representing another professional group and its activities are largely determined by that other profession's conception of its own needs.

By this statement we do not mean to imply that social workers in such organizations have no control over what they do or no responsibility for elucidating their own conception of the services they have to offer. The point is made instead to call to attention the fact that in these organizations the original impetus to the formation of a social work facility came from another profession and was occasioned by the recognition of need for help in carrying on its work. The social work services to be offered must therefore contribute to that end and cannot profitably be dictated by needs discovered in the clients that are remote from the organization's field of work.

To be more specific, visiting teacher services, for example, are set up within schools because school boards and superintendents believe that the reasons certain children are not benefiting from school lie outside their physical and mental equipment. They expect a visiting teacher to discover what these reasons are and to institute measures that will help the children make better use of the opportunities the school affords. Case work study of the children may reveal many unfortunate circumstances in their lives: the father may be unemployed, the mother suffering from neurotic ailments, the housing may be inadequate, the health of infant siblings neglected, and the moral standards of the whole family may be questionable. The visiting teacher, however, cannot concern himself with all these problems, and cannot use his clients' school difficulties as an excuse for attempting to remodel the total life situations of the families in question. Instead, he must confine himself to giving help with the problems for which the visiting teacher service was set up or run the risk of discrediting it in the opinion of the school authorities.

We shall have much more to say about this point later. Here it is made in order to call attention to the necessary relation between a social work agency or department's activities and the sponsoring body's conception of needs that called it into existence. In this respect the position of a social work department of a school, court, or hospital is no different from that of an independent social work agency. The

latter, too, owes its origin to some group's recognition that help with some particular kind of social problems is needed, and to that group's ability to secure funds (through taxation or otherwise) for that purpose. The technical methods that social workers devise for meeting these needs are their own professional concern and cannot be fully explained to the lay public (any more than can the corresponding techniques and theories of the medical and legal professions). But, like other professional groups, social agencies must confine their activities to the solution of the problems which called them into existence if they would retain the public's confidence. The well-established professions do not need to stress this point because they and the public are usually in agreement as to the limits of the field in which they are to operate.[5] That it is the cause of so much confusion among social workers testifies to the fact that the function of social work is often not clearly understood either by the profession or by the public that gives it financial support.

Organizations Giving Service to Other Social Agencies

The fourth category of social institutions by means of which social work is carried on consists of the organizations which serve social agencies themselves. Their presence is evidence of the complexity—and, to some extent, of the disordered character—of the field of social work, for among their chief objectives are the prevention of overlapping of services among agencies and the furtherance of the efficient meeting of social welfare needs. In their present form these organizations are known as community chests or funds and councils of social agencies, but it is worth recalling that case work itself originally developed out of an effort to reach very similar objectives.

The original purpose of community chests was to eliminate the numerous and often competitive "drives" for funds which were engaged in when each social agency had to finance itself. It seemed reasonable to suppose that a united effort would secure just as much money as was raised through individual efforts, and it was assumed that the chest would limit itself to the money-raising task and that the rest of the work of the agencies would continue as previously. It soon became apparent, however, that union for fund raising necessitated union for other purposes as well, for a division of funds had to

[5] An example of the opposite situation is supplied in communities in which the schools' educational methods and objectives are not in line with the public's conception of what schools are for.

be agreed upon, all causes did not appear equally meritorious of public support, there was overlapping among agency services, and so on.

Some of these problems had already been recognized and discussed in the organizations of social agencies which were usually called councils. When such a council was in existence in a city it was rather common practice to attach the community chest to it; in fact, the council might itself initiate the plan of conducting a single campaign for funds. Alternatively, a chest, once organized, was likely to entail the organization of a council as a subsidiary part. At present both of these forms of organization are to be found and, in addition, some cities have both chests and councils as separate organizations. Chests are in existence in all cities of over 500,000 population and in most of those of over 100,000. Councils are also very common, and a considerable number have been organized even in small towns and rural areas, where the financing of private philanthropies is less a point at issue but where the need for the co-operative effort of all "socially minded" institutions and individuals is likely to be greater.

When separately organized, chests and councils are likely to differ somewhat in their membership. Chests originally were inclined to include as many agencies as possible in order to limit the number of individual campaigns for funds. Present opinion, however, inclines to admitting to membership only those agencies which are regarded as having standards which the chest can endorse. Certain national organizations, such as the Red Cross and the National Tuberculosis Association, seldom join community chests, so that even at best the chest campaigns do not cover all social welfare work. Public agencies also do not join chests, since their funds are derived from tax sources.

Numerous agencies which are not engaged in social work as we have defined it are members of community chests. Most conspicuous among these are hospitals, other health organizations, and those offering facilities for leisure-time activities. The extent to which these and other types of organizations share in chest funds is suggested by the following percentages which show the average for the United States in a recent year: organizations devoted to care of the aged, 2 per cent; dependent children, 15 per cent; family welfare and general dependency, 25 per cent; delinquency, 3 per cent; hospitals, 10 per cent; health agencies, 11 per cent; leisure-time organizations, 23 per cent; chests and councils, 9 per cent.[6]

[6] Cited by Ralph Blanchard, "Community Chests," *Social Work Yearbook* (1939), p. 89.

In contrast to the chests, it is the usual aim of councils of social agencies to include in their membership as many as possible of the organizations that are engaged in one or another form of social work, as that term is broadly interpreted, for their aim is to raise rather than protect standards, and to secure co-operation and co-ordination of efforts. Accordingly, public relief agencies are often very prominent members of councils, as are others that are kept out of chests by policies of their national administrative boards. In both chests and councils the customary form of organization is that in which member agencies are represented by two delegates each—one likely to be a representative of the professional staff and one a board member. These delegates nominate and elect the chest or council's board, which in turn engages the technical staff. Further work of the organizations is usually carried on through committees representing "functional" divisions of social welfare—child care, family welfare, leisure-time activities, and so on.

The primary purpose of chests is to raise and disperse funds; that of councils to bring about adequacy in the provision of services. Both of these purposes entail what is rather vaguely described as social welfare planning, and that in turn necessitates research and evaluation. Since, however, both of these bodies are voluntary associations of agencies, and the agencies already have interest and commitments in particular areas of social welfare, this planning cannot have the authoritative nature or all-embracing character that the term might imply. In other words, it is not planning in the sense that a superbody surveys needs and distributes tasks among subordinate organizations. Chests and councils cannot do this even in the sense that legislatures and boards charged with carrying out their general directions can. What the planning really aims at is the determination of the quantity and quality of needs in the population to be served, the adaptation of available resources to meet those needs, and the avoidance of duplication of services and competition for clients. In that endeavor the chests' source of authority is derived from its control over membership in the organization, budgets, and the apportionment of funds. Councils, on the other hand, must work through joint discussion of findings and persuasive argument, for they have no other power.

Closely associated with planning are the councils' efforts to evaluate the character of potential or actual clients' needs and the fitness of the services which the agencies afford in meeting them, and to set standards for adequacy and competency in the field. To them come

such questions as the following: Does the community have adequate facilities for the care of unmarried mothers and their children? What happens to dependent girls who have no homes and are too old for foster care and too young to be eligible for public assistance? What does the trend in volume of applications for one or another type of service imply as to the adequacy of "home relief" grants? What story do the delinquency figures tell as to neighborhood conditions and the need for recreational facilities? Some questions involve extended research; others can be easily answered but call for the marshaling of public opinion or pressure on the legislature; others require "soul searching" among the agencies themselves and critical examination of the quality of personnel and services. It will be seen that several of the activities which we earlier characterized as being only dubiously a part of social work are included here: research, community organization, social action; and that they enter into the social work picture in being auxiliary to the main efforts, a means through which these efforts are facilitated.

In addition to these activities in the field of planning and fund raising and distribution, chests and councils serve their member agencies in other ways. Through them a considerable amount of publicity is carried on, particularly with respect to the needs of the various categories of clients; record is kept of trends in volume of work and in expenditures; evaluative studies are conducted for the individual agencies' own benefit; and social service exchanges and information services are usually operated. Through the former, agency workers can learn which agencies have previously given assistance to individuals who apply for help, while through the latter the public can secure advice about where to go for aid with their problems. Finally, councils—through their lay membership and the representatives of non-social-work organizations that are usually included in them—are a means of arousing public interest in the agencies' programs and in securing supplementation of their efforts through other local sources.

It is to be noted, in conclusion, that many of the activities in which chests and councils engage are also undertaken by many social agencies individually. Agencies carry on publicity with regard to their work and try to cultivate favorable public relations. They engage in planning and community organization and in research as a basis for planning and evaluation. They consult with other agencies about mutual problems and services. Some of them even engage in social

action—calling the public's attention to the social conditions which their work and studies reveal and mobilizing public opinion for pressure on legislatures to bring about what they regard as needed changes. Many of the activities of chests and—especially—councils are, accordingly, not peculiar to those organizations. They serve other social agencies not so much in carrying on activities that would not otherwise be undertaken, but in co-ordinating, increasing and, frequently, improving the quality of those activities.

Comments

Without attempting a detailed analysis, two facts may be noted about the structure through which social work services are made available to the public. First, there is no such thing as an organization engaged in general social work practice. Some organizations afford assistance with a greater variety of problems; that is, assistance in meeting difficulties that arise in a greater variety of institutional relationships. Representative of such organizations are the government-financed child welfare services in rural areas and the private organizations in cities that go by such names as community service society or social service association. Even these organizations, however, are somewhat specialized and seldom include the total range of social work activities in their scope.

Second, by and large, social work services are provided in connection with specific social institutions and are directed to helping people with the difficulties they encounter in using or participating in them. The social work departments of schools, courts, hospitals, and child-caring and correctional institutions are the clearest examples of this, but what we have called "organizations primarily engaged in social work with clients" are also usually aligned with specific institutionalized activities, such as those of the family, the foster family, or the community. This fact is of great importance in the actual practice of social work, for, as will be shown later, there is considerable dispute among social workers about what limitations they should place upon their activities: should they attempt to resolve all the social difficulties of each client or should they confine their activities to the particular institutional area in which their organization is expected to operate? Since structure is not an arbitrary arrangement but functionally related to activities to be carried on, this observation that social work services

are provided within or in connection with institutional settings would suggest that the second question should receive an affirmative answer.

In the following chapters, in which we shall pursue further the question of how the function of social work is at present discharged, attention to organizations and their structure will be subordinated to attention to activities. Nevertheless it will be seen that the two aspects of social work are interrelated and that the function of the total social work institution determines both of them.

Suggestions for Further Study

Atwater, Pierce, *Problems of Administration in Social Work,* University of Minnesota Press, Minneapolis, 1940.

Describes the administrative activities that are necessary to keep social agencies functioning well—financial, fund raising, publicity, personnel, central planning, etc.

"Community Chests"; "Councils of Social Agencies," "Coordinating Councils," *Social Work Yearbook* (1937, 1939, 1941).

Deardorff, Neva, "Social Study by Councils of Social Agencies and Community Chests," *Social Service Review,* XI (1937), 167–94.

Describes the research activities of chests and councils in terms of purpose, areas of study, and prerequisites for effective work. Very good analysis.

Family Social Work and the Community, Family Welfare Association of America, 130 E. 22d Street, New York, 1935.

Brochure describing purpose and work of case committees and giving examples of how such work is carried on. Bibliography.

Kelso, Robert, *The Science of Public Welfare,* Henry Holt and Company, New York, 1928.

Detailed descriptions of the organization of departments of public welfare in certain states whose systems are particularly interesting; also describes county and municipal systems, and has interesting historical material. Well worth reading, even though certain sections are out of date.

King, Clarence, *Social Agency Boards and How to Make Them Effective,* Harper & Brothers, New York, 1938.

An analysis of why boards are needed, what they do, how they should be organized, and what some of their common problems are.

Klein, Philip, and Collaborators, *A Social Study of Pittsburgh,* Columbia University Press, New York, 1938, pp. 398–484.

Analysis of the planning and co-ordination of social work and social welfare activities in a large city. Useful for showing the variety of agencies and the complexity of social welfare organization.

McLean, Francis H., *The Family Society: Joint Responsibilities of Board, Staff, and Members,* Family Welfare Association of America, 1927.
One of the few discussions of this subject, and hence important in spite of its date.

Millspaugh, Arthur C., *Public Welfare Organization,* The Brookings Institute, Washington, D. C., 1935.
Analyzes, classifies, and describes various types of organization for public welfare; discusses problems and gives criteria for more effective organization.

North, Cecil Clare, *The Community and Social Welfare,* McGraw-Hill Book Company, New York, 1931.
Describes the organizations and programs through which social welfare activities are carried on in cities. Note that this writer equates social welfare and social work.

Services to the Armed Forces, The American National Red Cross, 1941.
A brochure describing the activities of the organization in wartime.

"Settlement Houses," "Boys' and Girls' Work," and other pertinent articles in *Social Work Yearbooks.*

Street, Elwood, *The Public Welfare Administrator,* McGraw-Hill Book Company, New York, 1940.
Chapter XXI discusses public boards and how they operate.

United States Government Manual, Executive Office of the President, Office of Government Reports, U. S. Information Service, Washington, D. C.
Current descriptions of federal agencies: history, organization, and services. This manual, issued three times a year, is a most useful source of information about federal social welfare programs.

What Councils of Social Agencies Do, Community Chests and Councils, Inc., 155 East 44th St., New York, 1939.
One of a series of short monographs prepared by this organization. A digest and analysis of the activities undertaken by councils of social agencies in twelve cities.

Part III

HOW THE SOCIAL WORK FUNCTION IS DISCHARGED

Chapter X

SOCIAL CASE WORK IN THE PUBLIC ASSISTANCE PROGRAM

With the function of social work analyzed, the origin of the institution and the main outline of its development traced, and the structure through which it operates described, we are in a position to study the ways and means by which the function is carried out in current practice. Since chief attention so far has been given to the evolution of social case work in family welfare organizations, it will be necessary to give some consideration to historical developments in other areas, but the main objective of this part of the book is to make understandable the present purposes and activities of social workers—especially social case workers [1]—in various fields. This might have been done by describing the work of particular types of social agencies but, since these are in a state of flux and not uniform throughout the country, it has seemed more satisfactory to take as a starting point the definition of social work's function and to trace out how assistance is given to individuals with regard to the difficulties they encounter in the use of the various social institutions.

Since social work originated in the field of poor relief and its first efforts to cope with the problems in that field have already been described, it seems appropriate to start our analysis of current practices there, even though the place of social work in what is now called public assistance is still ill defined and occasions much debate on the part of administrators, social workers, and the general public.

It has been shown that for years social work in the field of poor relief was concerned with the abolition of destitution. For a time an attempt was made to achieve this end by the moral regeneration of

[1] Emphasis is put upon social case work not only because it is the most highly developed part of social work but because, if its assumptions, purposes, and working methods are adequately comprehended, the rest of social work can be easily understood.

needy individuals one by one—those who appeared capable of being made self-sufficient were offered advice, counsel, material aid, and an entree to medical and educational and other resources. Later, the efforts of social workers were chiefly directed to the reform of economic and other social institutions. Later still, there was found in psychological theory an explanation of the cause of individual malfunctioning, and social workers turned with renewed enthusiasm to the task of relieving individuals, case by case, from their need to be dependent upon private or public philanthropy.

In all of these efforts, social workers—after the first attempt in London to bring the public relief authorities into the circle of their co-operators—tended for many years to avoid connection with government-financed poor relief. The poor law, in both England and the United States, was looked upon as the last refuge of the destitute, the provision the government made so that nobody would starve. But social work was dedicated to saving people from the need to resort to such assistance. Consequently (especially in the United States, where the funds of private charitable enterprises were large), social workers tended to look askance at public relief programs, since individuals could obtain financial assistance on the basis of their needs rather than on their show of desire to escape from their wretched condition. Not for many years were social workers greatly interested in proposals for social insurance, for these implied that poverty was not a matter of individual fault or one requiring an individualizing type of remedy.

The economic depression of the 1930's, however, created a situation in which these attitudes were sharply challenged by the social work profession itself. The methods and skills of social work had become highly developed and had been found useful in many fields in which individuals encountered difficulties in their social relationships. Poverty could no longer be regarded as a matter of either individual fault or individual psychological maladjustment. The occasion was set for a serious reconsideration of the place of social work in a relief program, and for a decade and more social workers struggled to clarify what their profession had to contribute to the old problem of how to avoid pauperizing the recipients of public relief. It is with the story of that effort that this chapter is chiefly concerned, but it requires for its understanding some knowledge of both the poor relief system in the United States before the economic depression and the basic theory of social case work which had been evolved by that time.

American Public Poor Relief before 1930

In many respects the American public relief system before 1930 was practically a duplicate of the system established by the Elizabethan statutes. The poorhouse was the chief means of caring for the destitute, the laws of ten states up to 1929 not mentioning outdoor relief at all.[2] In a few states the care of the poor was still let out to the lowest bidder, and destitute children were indentured or apprenticed to those who would support them. Poor relief, for the most part, was locally financed and administered, the official bodies in charge of the work being such varied authorities as county commissioners, grand juries, county courts, or elected or appointed poor law commissioners or overseers of the poor. In rare instances, social workers were engaged to investigate applications for assistance, but frequently no investigations were made, reliance being placed on the "pauper's oath" that the applicant was absolutely destitute and on the meagerness and unpleasant conditions of the allowances.[3] In Massachusetts it was the practice for years to grant two dollars a month in summer and three in winter, while in Pennsylvania in 1924 the average monthly allowance per person was eight cents a day.[4] The settlement laws further handicapped the destitute person, for relief was allowed only to those who could prove that their legal residence was in the town or county in which their application was made.

Attitudes of indifference, suspicion, and distaste characterized much poor relief work. The situation has been described as follows:

> Relief was usually given on the basis of whatever personal knowledge they [the poor directors] happened to have, no matter how scanty. This was supplemented by hearsay and gossip. They made very few visits to the homes of the poor. They put much emphasis upon the difference between

[2] Josephine Brown, *Public Relief, 1929–1939,* Henry Holt and Company, New York, 1940, p. 10. Much of the material in the early part of this chapter is based on this book, which is recommended to those who want a detailed account of federal and state programs worked out during the 1930's.

[3] In Pennsylvania, for instance, a report of conditions in 1925 revealed that "there is seldom an inquiry into the particular circumstances leading to the necessity for public relief and an attempt to find out the underlying difficulties the family or individual is facing, in order to set up a workable plan for immediate treatment and future rehabilitation."—Emil Frankel, *Poor Relief in Pennsylvania: A State-wide Survey,* Bulletin 21, State Printing Office, Harrisburg, 1925, p. 58. Quoted by Robert Kelso, *Science of Public Welfare,* Henry Holt and Company, New York, 1928, p. 181.

[4] Robert Kelso, *op. cit.,* pp. 181–83. See Chapter XII of his book for a good description of several state and municipal systems before 1930.

the "worthy" and "unworthy" poor, but to both the ineradicable stigma of dependency was attached as soon as they were given even emergency or temporary relief, however small the amount might be. To be "on the town" or "on the county" was the lowest state outside prison to which a member of the community could descend. Moreover, it was necessary to be absolutely destitute in order to be eligible for relief, and in many localities a "pauper's oath" was required in the form of an affidavit or a signed statement attesting the applicant's need. Once on the lists many paupers never got off, and their relief continued until they moved out of town or died. A defeatist philosophy, widely held by public officials, assumed that this must be so, and hence a *laissez-faire* policy and general indifference contributed to the creation of a class of chronic dependents.[5]

That this situation was recognized as demoralizing and degrading is shown by the fact that successive efforts had been made to secure other provisions for those whom the public regarded as being in extreme poverty through no fault of their own. The victims of disasters—such as floods, extensive crop failure, and earthquakes—were customarily given temporary assistance through state appropriations, and most state governments gave pensions to needy war veterans and their widows. The unsatisfactory conditions in county and municipal poorhouses were early recognized, and certain categories of persons with special handicaps (the insane and the feeble-minded) were eventually taken out of them and put in state institutions instead. Some states went further and provided institutional care for epileptics, for blind, deaf and dumb, and crippled children, and for dependent children in general, while others granted subsidies to private institutions affording care to these classes.

Similar efforts were made to remove from the outdoor relief rolls certain groups that were considered especially needy or "deserving." The blind were the first to receive such special consideration, the first aid-to-the-blind law being passed in 1907. Dependent children came next, with assistance provided through so-called mothers' pensions, while during the 1920's most states passed laws permitting special aid to the aged. For the most part, however, these laws were only permissive, state appropriations to supplement county funds were very inadequate, and administration was usually left in local hands with little or no state supervision. Although these provisions undoubtedly lessened the stigma attached to public relief and provided aid under

[5] Josephine Brown, *op. cit.*, p. 15.

more "self-respecting" conditions, nevertheless it was in rare counties that they were put into effect in a manner or to an extent that really met the problem of economic insufficiency.

In the meantime some advance was being made in the conduct of general outdoor relief. During the 1920's and earlier, attempts were made in a few counties and cities to take its administration out of the hands of political appointees, and what were regarded as the methods of social work were introduced.

There were two aspects to this use of social workers in poor relief departments. On the one hand, it was considered a good investment, for progressive poor relief administrators claimed that when social workers were employed to investigate the merits of applications for public assistance and to keep track of whether relief recipients continued to be eligible for grants, both parties to the transaction were benefited.[6] On the other hand, the use of social workers by poor relief agencies evidenced an attempt to make these agencies counterparts of family welfare societies under public auspices. This was the objective of the "Iowa plan," sponsored by the American Association of Charity Organization Societies, by which public and private agencies were to be combined under the direction of a trained family welfare worker who would administer relief, child welfare, recreational, and other services. The plan was advocated for municipal and county public welfare departments as well and was described as the "socialization" of public welfare. The test of whether this socialization was achieved by any given relief agency was stated by Mary Richmond as "whether its recipients were being helped to effective living," whether their "permanent welfare" was being advanced.[7]

In accordance with these objectives some changes did take place in poor relief administration. Trained social workers were appointed to the staffs of a few municipal and county welfare departments, and there was considerable discussion in social work journals and conferences about the problem of poor relief administration. By and large, however, public poor relief remained untouched by developments in privately financed social work, and social workers themselves were rather antagonistic to an increase in social work services under public auspices.

[6] See Robert Kelso, *op. cit.*, pp. 195–97.

[7] Mary Richmond, a letter written to *The Family*, III (1923), 239.

Traditional Attitude of Social Case Workers toward Public Relief

Even since the 1870's the subject of private versus public charity had been one of ardent dispute. In those years, as has been shown in Chapter VIII, charity organization societies, modeled on the London pattern, had been established in many large American cities, and privately financed social agencies had made great strides toward assuming the care of the urban poor. The factors underlying the charity organization movement in this country were very much the same as those in England. For years, especially in depression periods, the public had been growing increasingly dissatisfied with public poor relief. On the one hand, it was feared as a source of political power and patronage, and, on the other, its ill-equipped officials and its harsh and pauperizing methods were deplored. Canon Barnett's plea to abolish all outdoor relief found corresponding action in the United States, where in 1879 several large cities abruptly stopped all financial aid without any apparent bad results.[8] The arguments made in England in favor of private charity (that it was more friendly, less damaging to self-respect, more easily controllable, and not likely to be looked upon as a right) were also repeated here, and for many years there were few advocates for public relief among the growing profession of social work.

Even the attempts to improve the administration of public poor relief were met with skepticism and distrust. This was evidenced particularly in the attitude of social workers toward the growing child welfare movement. Child welfare had been the subject of the first White House Conference on Dependent Children which President Theodore Roosevelt organized in 1909. At that conference the principles that children should not be separated from their mothers because of poverty alone and that home care for children was usually preferable to care in institutions were accepted as a basis for public policy, and impetus was given to the establishment of a Federal Children's Bureau and a system of mothers' pensions. Many social workers, while approving the principles, opposed the extension of relief funds for dependent children because they doubted that public officials would administer them properly and provide the kind of supervision which private children's and family agencies were affording. Mary Richmond, the leading spokesman for the private agencies, for instance, said that she was not opposed to public welfare as such but to giving the

[8] Josephine Brown, *op. cit.* pp. 40–41.

responsibility for it to governmental bodies that were not equipped to conduct the work in accordance with approved case work standards.[9] The controversy continued for years but with gradually lessening vigor as it was demonstrated in some states that the work could be put upon a professional rather than a political basis.

Close analysis of the argument shows, however, that there was more to the problem than the question of the source of funds and the character of the administrative authorities. The whole question of social work and its function was involved in it, though it was never so explicitly stated. Social work in the beginning, it will be remembered, had two aspects, the distinctive nature of which was usually overlooked. On the one hand, it was an attempt to introduce order and efficiency into poor relief; on the other, it aimed at the rehabilitation of people who were regarded as in one way or another incompetent. The second aspect had as its corollary that people who were not worthy or who were un-co-operative or who were not amenable to help (the concepts varied with the years) were not acceptable as clients, while those who required only money to achieve independence did not need the agencies' services.

This objective of individual reform brought both praise and blame to social work. Many gave financial support to social agencies largely because they seemed to promise the eradication of socially disapproved conduct, while others objected to what they regarded as "snooping," self-righteousness, and unjustified control over people's lives. Organized labor was, at one time, definitely opposed to social work, seeing in it an effort to check public expenditures and to confine financial assistance to those who could be led to accept the economic *status quo*. Before social work could be brought to the service of poor relief, therefore, changes had to be effected both in poor relief philosophy and administration and in the objectives and practices of social work itself.

Changes in Poor Relief Policies and Practices during the 1930's

The change in viewpoint about poor relief came chiefly with the major economic depression which began in 1929. Before that time some headway had been made, as has been said above, in taking relief out of the hands of political appointees and putting its administration in the charge of social workers. There had been more progress in this respect in child welfare work than in "general relief," but in a few

[9] *Ibid.*, p. 48.

cities and counties public welfare departments during the 1920's tried to adapt the procedures of social work to their needs. This work, however, was carried on side by side with that of private family and child welfare agencies, and the attitude persisted—especially in cities—that public relief was to be used only as a last resort. The upstanding, self-respecting poor were the clients of the private agencies, protected by them from having to seek assistance from public sources.

With the onset of the depression, privately financed agencies (chiefly family welfare societies) that gave relief in addition to other forms of service found themselves in difficulties. Unnoted by the public or by most social workers, public relief expenditures had been increasing for twenty years. An analysis of the situation in fifteen large cities showed that in 1928 nearly three fourths of all relief came from public funds.[10] Nevertheless, private agencies had secured contributions for their work largely on the grounds that it consisted chiefly of relieving and preventing economic distress and that private charity was preferable to public doles. It was not unexpected, therefore, that the private agencies were looked to as the principal means of meeting the needs of the rapidly mounting numbers of unemployed, and that there was great reluctance to increase local taxes or to invoke state aid. This attitude—and the accompanying belief that most unemployment was due to individual fault—yielded slowly to the facts of the situation, for the figures of unemployment climbed from about three million in the spring of 1929 to fifteen million four years later, when one in every six families was receiving relief.

The story of the period in which the financing and supervision of relief expenditures were assumed first by the states, then subsidized by the federal government, then divided between the two on the basis of the disabilities of the clients is a complicated one and not wholly pertinent to our investigation. It seems sufficient for our purpose to point out a few developments connected with it which have particular bearing on social work. Among the important changes were those that broadened the base of financial support for public relief programs and that placed unemployment in the same category of unculpable misfortune as old age, widowhood, and industrial accidents. Franklin D. Roosevelt, as governor of New York, expressed this point of view in the message he sent to the legislature in August, 1931. This message

[10] A. W. McMillen, "Some Statistical Comparisons of Public and Private Family Social Work," *Proceedings of the National Conference of Social Work* (1929), p. 518.

led to the establishment of the first "emergency relief administration," through which state aid was given to local relief authorities.

> One of the duties of the State is that of caring for those of its citizens who find themselves the victims of such adverse circumstances as makes them unable to obtain even the necessities for mere existence without the aid of others. That responsibility is recognized by every civilized nation.
>
> While it is true that we have hitherto principally considered those who through accident or old age were permanently incapacitated, the same responsibility of the State undoubtedly applies when wide-spread economic conditions render large numbers of men and women incapable of supporting either themselves or their families because of circumstances beyond their control which make it impossible for them to find remunerative labor. To these unfortunate citizens aid must be extended by government—not as a matter of charity but as a matter of social duty.

The widening of the governmental unit that was to be responsible for the relief of distress did not necessarily alter the character of the relief personnel, their attitudes toward poverty, and the services given, but it made such changes more likely than when the whole duty was left to local communities. It became much easier for organized social work to make its point of view known to the persons in authority, and it is significant that the use of social workers as relief officers was early advised. A report of the New York Temporary Emergency Relief Administration issued in January, 1932, put the reasoning as follows:

> The Administration has come to appreciate how important training and experience are in the field of social work. Those in distress are naturally sensitive and the approach by untrained or unsympathetic workers . . . tends to aggravate that distress. The Administration desires to record the tactful and efficient methods of trained social workers and to express the hope that most, if not all, of the communities with which it has been in contact are of a similar mind, and will wish in the future to include among their executives trained personnel to handle social problems.[11]

Other states followed the example of New York, and when the Federal Emergency Relief Administration was set up in 1933, the work of interviewing applicants, establishing eligibility, and determining the amount of aid to be given was entrusted to "social service divisions,"

[11] Social Service Personnel in Local Public Relief Administration," *FERA Division of Research and Statistics* (February, 1935), p. 30. Quoted by Josephine Brown, *op. cit.*, pp. 93–94.

which were required by law in the larger districts to include at least one supervisor "trained and experienced in the essential elements of family case work and relief investigation." [12]

With the recognition that unemployment was very often not a matter of personal fault came an alteration in the status of the person applying for assistance. He could no longer be viewed as a beggar asking for something to be given out of pity or sympathy for human frailty but had to be regarded as a citizen asking from his representatives that his case be considered. A fact promoting this change in attitude was the extent to which the depression affected people in the middle- and upper-income groups. Throughout the country, people lost money and jobs without respect to former economic status, and relief administrators and workers could feel that they themselves might soon be in the position of their clients. This fact made sympathy and understanding easier and so prepared the ground for the radical shift in point of view about the rights of people in distress. This changed attitude toward applicants for relief was, of course, not a universal one, or one that was universally maintained after the emergency ended. There were many who continued to believe that willing workers could always find jobs, and their numbers increased with the return of more stable economic conditions. Nevertheless, during the depression years the new point of view took firm root in social work circles and made possible the building of a code of practice which put the relationship between applicants for relief and the dispensers of relief on a professional rather than a sentimental or authoritarian footing.

Another significant change in relief policy that was worked out during the depression years was that having to do with the amount of assistance and the form (usually cash) in which it was given. This, too, was related to the changed conception of the causes of economic disability and of the reasons for the government's concern. As long as it was thought that unemployment and poverty were due to individual fault from whose consequences people should not be relieved lest others fall into the same way of life, relief grants were kept very low. When, however, the social causes of unemployment were recognized, impetus was given to the policy of making grants adequate to sustain health and a decent standard of living, a policy which already characterized some of the earlier relief work with certain classes of people, such as widows with dependent children.

[12] *Rules and Regulations, No. 3,* Federal Emergency Relief Administration, July 11, 1933.

According to Rules and Regulations No. 3 of the Federal Emergency Relief Administration (the federal authority that between 1933 and 1935 made grants to states for relief purposes), all states and their political subdivisions had "to see to it that . . . all needy unemployed persons and/or their dependents shall receive sufficient relief to prevent physical suffering and to maintain minimum living standards."

The interpretation of this ruling varied widely, of course, but by May, 1935, the average monthly grant in the country as a whole had gone up to $29.33 per family per month, an increase of $14.18 in a two-year period.[13] Even at that, Harry Hopkins, the Federal Administrator, commenting on the difficulties the Administration met, said: "It is curious that among the almost innumerable criticisms we have experienced, the one most truthful allegation is never made except by the families who depend on us. *We have never given adequate relief.*"[14]

None of these changes in relief policy gained universal acceptance and all aroused much opposition from large sections of the public. Nevertheless, by the time the permanent (as contrasted with the emergency) program was worked out, they were sufficiently well established as to alter greatly the general character of the relief work.

The Present[15] *Public Assistance System*

The responsibility of the larger governmental units for assuming a major share in the relief of economic distress was firmly established in the Social Security Act.[16] That act, passed in the summer of 1935, must be considered in connection with the large federal works program which was set up at the same time. Under the latter in its various forms (work relief, public works, special projects, such as camps, rural rehabilitation, and youth programs), the federal government attempted to provide jobs for the able-bodied unemployed. By this means the economic organization of the country was widened so that it could embrace the majority of needy jobless people who were able to work.

[13] Cited by Josephine Brown, *op. cit.*, p. 249. The extremes among states in May, 1933, when the act was passed, were $3.86 in Mississippi and $33.22 in New York, while in May, 1935, they were $11.32 in South Carolina and $52.92 in Nevada.

[14] Harry Hopkins, *Spending to Save*, W. W. Norton & Company, New York, 1936, p. 99.

[15] 1942.

[16] 49 U. S. Statutes at Large, 74th Congress, 1st Session, ch. 531. (August 14, 1935); amended in 1939.

Closely associated with this extension of the economic structure was the establishment by the Social Security Act of a system of old-age and survivors' benefits and unemployment insurance.

On the side of relief—as contrasted with insurance—the Social Security Act provides federal subsidies to state programs of assistance to certain categories of needy individuals: the aged, the blind, and dependent children. In order to obtain these funds, states have to submit for approval programs that will "be in effect in all political subdivisions of the State, and, if administered by them, be mandatory upon them," will "provide for financial participation by the State," and will "either provide for the establishment or designation of a single State agency to administer the plan or provide for the establishment of a single State agency to supervise the administration of the plan." [17] By these provisions federal and state governments have been made responsible for the financial support and the administration or supervision of a large segment of relief work, and encouragement has indirectly been given to bringing all public relief under state control.

In addition to these programs for the relief of persons deprived of their usual means of support, the "general relief" programs of local governments have been continued with greater or less modification. These are the traditional poor relief systems described above, and it is to them that destitute individuals who cannot qualify for any of the other relief services must look for help. In some states and in certain localities in other states great improvements in this general relief system have been effected, but in many places they continue to be administered in accordance with the same policies that have been in force for decades.

By 1939 in five states (Arizona, Delaware, Michigan, New Mexico, and Pennsylvania) general relief as well as the "categorical" services were administered by state agencies; in nineteen others local administration was centrally supervised. In the remaining states, general relief had been turned back to the township or counties, there to be decided whether or not it should be dispensed by the authorities which locally provided aid to the aged, the blind, and the dependent children. It is very difficult, accordingly, to generalize about the administration of public relief by the end of the 1930's except to say that it was such that in many states the old and new forms existed side by side.

As to the size of the relief burden and the relative share of these various forms of relief in the total expenditures, the following figures

[17] Social Security Act, Title I, sec. 2.

are enlightening. In October, 1938, there were about 21,300,000 people or 6,600,000 households on the relief rolls of the various public agencies.[18] In the preceding year the following amounts of money (in millions of dollars) were spent on public relief extended to clients:[19]

1. Public assistance	$398	17.1	per cent
Aged	$311		
Dependent children	71		
Blind	16		
2. General relief	408	17.5	" "
3. Wages paid on work projects	1,247	53.4	" "
WPA[a]	1,100		
Other federal	94		
NYA	53		
4. Wages paid in CCC	246	10.5	" "
5. Emergency subsistence payments to farmers	36	1.5	" "
TOTAL	2,335	100.0	" "

[a] WPA—Work Projects Administration; NYA—National Youth Administration; CCC—Civilian Conservation Corps.

It is clear, then, that although the federal government carried the major share of the cost, general relief, paid for locally or by state governments, formed no small part of the total.

This division of federal, state, and local responsibility on the basis of the disabilities of applicants for relief is clearly a makeshift and probably a transitory arrangement. It has the advantage of permitting a demonstration of approved relief procedures without waiting for the revision of the total public relief system; but in states in which there has been no integration of the new and the old programs, much confusion exists and equally needy clients are accorded different kinds of treatment, depending upon the category of dependency to which they belong.

The degree to which administrators of relief follow the other principles worked out during the depression years does not depend wholly, however, upon which governmental unit employs them. The Bureau of Public Assistance of the Social Security Board has consistently recommended policies that respect the dignity of clients and their right to assistance that is adequate for a decent standard of living, but it is authoritatively reported that "local traditions [and] time-worn atti-

[18] *Social Security Bulletin* (December, 1938), p. 37.

[19] Ewan Clague and Anne Geddes, "Why We Need a Social Security Program," *Annals of the American Academy of Political and Social Science,* CCII (March, 1939), 12–13. Relief through private agencies remained at about the 1929 level—about two to three million dollars. *Ibid.,* Chart II, p. 11.

tudes toward the needy . . . contribute to retard the full acceptance of the democratic principles and their application in practice." [20] Even the standards of adequacy of relief have gone by the board in many sections of the country. A survey of conditions, made by the American Association of Social Workers in the spring of 1939, showed, for instance, that the average allowance for food per person per month was $2.50 in Taos County, New Mexico, while in a certain Indiana township families of four were allowed $2.85 a week for groceries,[21] and that in one state grants for food were approximately one fifth of the minimum standard food budget prescribed by the United States Department of Agriculture.

In general, then, both relief organization and relief practice presented a confused picture by 1940. Great advances in both had been made during the ten years of economic depression, but they were not uniform or consistent advances nor were they securely incorporated into the relief system. Consequently, it is difficult to generalize about the activities of social workers in public relief and to draw conclusions about the place of social work in the system. The following analysis must be taken as only suggestive and tentative, for these questions are still among the most disputed in social work theory.

The Place of Social Work in the Public Assistance Program

When social workers were added to the staffs of the local agencies set up by the Federal Emergency Relief Administration or by the corresponding state relief organizations, there was far from complete agreement about the ends they were to serve. In the opinion of many, their chief duty was "to investigate families to see that no one obtained relief who could get along without it," [22] but some of the highly trained case workers who acted as supervisors and administrators had a different conception of their duties. It was the hope of many of them that the FERA program would lead to a permanent one of case work services under public auspices; and they tried for a time to demonstrate that the current conceptions of family case work were tenable in the public relief setup. This meant that the emphasis was put—though the techniques were different—on the objective the Char-

[20] Josephine Brown, *op. cit.*, p. 369.
[21] *Ibid.*, pp. 388–89.
[22] Harry L. Hopkins, *op. cit.*, p. 101.

ity Organization Society founders had aimed at: the effective participation of clients in economic and family life.

It was soon found, however, that this objective could not be carried out under the economic conditions of the depression period, nor could its major assumption that unemployment was usually due to personal inadequacies and handicaps be maintained. The old disharmony between giving people financial assistance because they could not exist without it and giving it to them because it would help them to become self-supporting became ever more apparent. An attempt was made to bridge the gap by an administrative ruling that "social treatment" should be provided for clients who needed and seemed able to use it, but that there should be no insistence that any applicant accept such help as a prerequisite for receiving financial assistance.[23]

Slowly it became clear, however, that public relief and family welfare work were inherently different. It was not only that the rush of relief work and the pressure of the clients' "reality" needs were so great as to preclude that leisurely exploration of problems on which good case work was thought to depend, but, much more important, the basic situation was different. An applicant for public relief came to the agency asking to have his eligibility to receive financial assistance confirmed and the assistance granted. He was asking for something that under certain conditions it was his legal right to receive. He might need help in budgeting his expenses, in general household management, in child care, and personal relationships, in dealing with problems of health and nutrition, but his willingness or lack of willingness to accept help with these problems had no bearing upon his right to receive financial assistance. Instead, eligibility for aid under either the programs to which the federal government made a contribution (aid to the aged, to the blind, and to dependent children) or any other state or local relief programs was dependent upon certain conditions laid down in law and administrative rulings.[24]

The significance of the difference between family welfare and public relief agencies becomes clear when our criterion for a social work institution is applied: one that carries out the social work function. That function, it will be recalled, is to help individuals to deal

[23] *Social Work in the Administration of Unemployment Relief,* Federal Emergency Relief Administration, Publication 5314 (multigraphed), April 30, 1935.

[24] We are not attempting to describe what those conditions are, since they vary considerably from time to time and place to place. It is recommended that, in order to give specific content to the above statements, the student inquire into the regulations currently in effect in his local community.

with the difficulties, peculiar to themselves, that they encounter in playing their part in specific social institutions or in using the services of those institutions. It has been shown that from the start the work of family welfare agencies (or charity organization societies) with poverty-stricken individuals and families was largely directed toward re-establishing them in the economic system, and that the efforts of these agencies were based on a consideration of the peculiar nature of each client's circumstances and capacities. In contrast, public relief agencies have always been concerned with providing a standardized form of assistance to all who meet certain specifications. Although they are set up to offset the inadequacies of other institutions and to meet individuals' needs for food and shelter that are not otherwise provided for, nevertheless they are a substitute for other institutions rather than an aid to their better utilization by needy individuals. In brief, public relief is not a social work institution, according to our conception of the term, but is an institution *sui generis,* with the function of augmenting the economic arrangements of society.

This conclusion, however, does not mean that there is no place for social work within the institution of poor relief. On that question there is a sharp division of opinion among relief administrators. Some administrators see no need for social workers, regarding them as soft-hearted and sentimental and not to be trusted with the important business of safeguarding the public's money. Such administrators attempt to put relief on what they call a strictly business basis: that is, they try to avoid the personal element in the dispensing of funds by drawing up criteria for eligibility which they consider so objective that they can be applied automatically by any investigator. They may even (if they are administering only "general" and not "categorical" relief) do away with investigators entirely, relying on the old poor law methods of personal knowledge and pauper oaths for the determination of an applicant's eligibility.

Other relief administrators justify the use of social workers on grounds of efficiency, recognizing that there are many intangible elements in the establishment of eligibility for relief that can be adequately evaluated only on the basis of careful analysis of each individual case. Such administrators maintain that even the most objectively framed regulations cannot take account of individual variations; that discretion has to be allowed in deciding, for instance, just how near to total destitution a person must come before being aided (must he sell every little object he has treasured or give up every means of

assistance he has—such as a pushcart or a broken-down car—for carrying on work?), or how much sacrifice or pride must be required in seeking support from estranged relatives. Administrators with this point of view have long employed social workers as investigators, with what appear to be notable results in savings both to clients' morale and to public funds.

The following example from an agency's files shows what complications may exist in apparently clear-cut cases and thus necessitate the use of skill and understanding in the granting of relief.

Case 1 [25]

Mrs. Narvik called at the Welfare Office to make an application for relief. She needed help, she said, as arthritis had crippled her hands, making it impossible for her to continue earning her living "washing other people's clothes." Slowly Mrs. Narvik told of her past, a story of frugal living from the time she arrived from Europe, an immigrant, alone and bewildered. For 45 years she had toiled uncomplainingly and now her usefulness was over. She needed help. Even the worker was somewhat startled when the woman, in reply to a question asked almost routinely about possible savings, offered a bank book showing, dollar by dollar, an accumulation of $500. As the worker talked to Mrs. Narvik about this, her perplexity was obvious. Yes, it was her money. But it was not money that could be used for the grocer and landlord. It was "trouble money" accumulated by years of self-denial against a rainy day. She might become ill; the future had unknown catastrophies for which she must provide. Her problem now was a simple one of meeting her daily expenses. She listened carefully to the worker's suggestion that she could not get help and that she was now facing the rainy day for which she had made provision.

A month later she was back. The money, she said, was gone. Hesitantly, she gave an explanation of what had happened to her savings. Now, she was really in need. She seemed even thinner and more panic-stricken. Her rent was still unpaid, she appeared to be hungry, and yet her story seemed unreasonable. Patiently the worker talked with her, and finally Mrs. Narvik drew from her clothing the $500, still untouched, that she had pinned in her dress. She had endured a month of deprivation, refusing to touch her savings, and still she was, in her own mind, badly in need of the aid she sought.

A third group of administrators employ social workers in a way that is most in line with social work's chief function: that is, to give

[25] Cited by Vivian Di Lallo, "What Resources Mean to Client and Worker," *Social Worker Today,* VIII (January, 1941), 20.

help in making the public relief agency's services of most value to the individuals who use them. When social work is directed to that end, workers do not confine their efforts to ascertaining eligibility and the clients' continuing need for financial assistance, although, of course, these are among their important duties. They also try to make the receiving or denial of relief a constructive experience for the applicant, one that will enable him to preserve or mobilize his personal resources. By such endeavors social work is at last put in the direct service of poor relief, and its efforts are finally turned to a direct attack on that century-old problem of how to relieve economic distress and yet avoid injuring those who are the recipients of relief.

To conceive the objective of social work in a public relief organization in these terms is less difficult than to put it into practice. The methods to be used and even the theory underlying them are still in the process of being worked out, and the attempt is limited to a relatively few centers. In most public relief agencies, one or the other of the first two points of view about the place of social work in a public assistance system prevails, but since the third one is in harmony with other developments in modern social work it seems likely that it will ultimately be more widely adopted. Hence a more detailed consideration of it here seems justified.

Principles of Case Work with Clients of Public Assistance Agencies

To put social work at the service of both clients and administrators of a public assistance program in such a way that the interests of both givers and receivers will be promoted has meant adapting modern case work principles to the requirements of this new field.

Definition of area of service

Among these principles one of the most important is that which limits social work services to matters directly connected with the function of the organization in which it is carried on. Applied to a relief agency, this means that social work is limited to matters concerned with the giving, receiving, and use of relief. This is far from a narrow field of activity, as later examples will show, but it does not include the kind of help with problems of family relationships, child care, and economic rehabilitation that other types of social agencies are set up to render. It is part of the duty of a social worker in a relief organi-

zation, as in any other agency, to know about and use the social resources of the community in the interests of his clients, but it is held that he cannot himself provide all forms of social work service without being overwhelmed with the magnitude of the task and in danger of confusing the issue for his clients.

This latter point is one of the most disputed in the theory of case work. Some authorities maintain that case work with any group of clients involves giving whatever manner of help seems needed and desired and is within the social worker's competency. Although an argument in favor of such a policy might be made when the relief agency is the sole source of social work services in a community, it would seem generally to be ill-advised, for under such an arrangement clients have difficulty in remaining clear about what is involved in taking financial assistance, what they have to do to continue to get it, and when or under what conditions it will cease. Since it is on a clear understanding of these matters—on a clear sense of rights and obligations—that the sustaining of a client's sense of dignity and responsibility depends, it is maintained that the issue ought not to be confused by the social worker's offering counsel and guidance about such matters as marital relationships, child care, or household management. In all large cities and many smaller ones and even in some rural communties there are other agencies established and equipped to give help with these latter matters, and it would seem best that a relief worker's responsibilities be confined to referring his clients to such resources if they want that kind of aid.

Case worker a representative of an agency

It is in this connection that another principle of case work enters. The social worker in a relief organization does not act as an independent practitioner, giving or withholding services on the basis of his own conception of needs and deserts and his own ability to carry out certain treatment measures. Instead, he meets his client as a representative of an agency that has certain services to offer on certain conditions, and it is his task to help an applicant to see whether he can and wants to meet the conditions and, if so, to help him use the offered services. If the social worker or his clients feel that the services and conditions on which assistance is granted should be altered, the fact that the agency is a public one puts them, as citizens, in a particularly advantageous position to effect change. In the meantime, however, the social worker must abide by the policies and purposes of the organiza-

tion and accept the fact that, as its representative, they are his policies and purposes also. It is only in this way that he is saved from emotional entanglements in his clients' problems and so rendered incapable of helping the clients to use the agency's services within the scope of the agency's limitations.[26] This principle is illustrated in the following case.

Case 2 [27]

For fourteen years Mrs. Peters had been given financial help, first by a private agency and later by the public agency, and she had never accepted her part in obtaining the financial assistance which had been provided. With all the power of a strong and unyielding person she resented the part of the social worker. For three years she was given relief by the public agency under her terms and her own control. The number of exceptions which had been made seem fantastic, if one believes that the procedure of a public agency assures that all clients will be treated alike. She set the terms and warned the visitor that if these were violated she, the visitor, would carry the blame. Like an uneasy, frightened property man, the worker kept the stage set for the frail and temperamental prima donna.

There was constant fear that Mrs. Peters would not be able to continue to take relief, and the worker's task was to make it more and more bearable. Evasion was heaped upon evasion. A special application interview was arranged, as she could not go through the ordeal of waiting with other clients. A special visitor was assigned. Eligibility requirements were touched upon lightly. No one must know she received relief, not even her children. When the children were at home the visitor spoke in a whisper. Plain stationery was used for correspondence so that the apartment house neighbors could not distinguish the mail coming from the relief offices. The conversation between worker and client was kept general. They discussed literature, clothes, and the movies.

As time went on Mrs. Peters reached a state of great frustration. Her health grew worse and she complained that doctors did nothing for her. She asked what was ahead for a woman in her position, since her professional training (as a beautician) was of no value to her. How did clients manage to live on a relief grant alone? (She was still receiving supplementary assistance from the family agency.) The visitor explained that those clients were not like Mrs. Peters. "Well," said Mrs. Peters, "you do not have to apologize for your agency." By this time the visitor was

[26] This latter point is made and well illustrated by Roberta Townsend, "Fact and Feeling in Eligibility," *Journal of Social Work Process,* II (1938), 15–31.

[27] Abbreviated from Roberta Townsend, *op. cit.,* pp. 23–31.

hopelessly involved and there was no way out for her except to maintain the relationship on the basis of fantasy.

At this time a new worker was assigned to the case. Mrs. Peters started to repeat the same methods with her, to put her in the same apologetic and subservient position. But the worker kindly but firmly insisted upon maintaining the realities of the relief situation. She asked to be shown the receipts for rent; she inquired whether the son, who was about to graduate from high school, had tried to find work and whether he had registered with WPA or NYA. At that Mrs. Peters said, "But that would be a relief job. I wouldn't want Earl to get one of those jobs. I hate relief." The worker said she could appreciate that feeling but that, in order to get relief, registration for a job is necessary. Similarly when Mrs. Peters asked that the worker write to her on plain stationery, she told her that office stationery is used for carrying on the office's business; she as a business woman could surely understand that. Mrs. Peters agreed that that was what the family agency did and so she supposed it was right that the relief agency do likewise.

And so the interviews continued. Under the stimulus of having to face what receiving relief really meant and the worker's implied confidence in her as a business woman and all that stood for, Mrs. Peters helped her son to get a job in private industry, considered plans for brushing up on her own profession, and willingly left the relief rolls. She hated relief to the end.

As to the worker, she accepted her position as a representative of the agency, and all the meaning it carried. She did not meet Mrs. Peters' anger or distress by becoming angry or distressed herself, nor by evasions which implied that she and the agency were different persons. She recognized that she was the agency's and the community's delegate to see that its provisions were carried out. And so she was able to lift herself out of the chaotic, never-ending personal involvement which occurred in the early history of the case and was able to fulfill with success her function of judging the basic facts of eligibility.

Psychology of giving and receiving help

From all this it is obvious that social work in a public relief agency requires especially clear understanding of the psychological aspects of giving and receiving help. That to give and to receive financial assistance is frequently difficult is a fact that is not commonly understood. Most people, including many relief administrators, think that there is nothing simpler than accepting money. They, like the founders of the Charity Organization Society, are chiefly perturbed over the speed with which (in their opinion) people rush to get "something for nothing"

and the deleterious effect that charity is believed to have on the desire to work. In consequence, most relief schemes in the past—if they were not a purely sentimental giving of doles—were designed either to deter people from asking for aid or to reform those who were forced to seek assistance. The new case work theory about the processes of giving does not deny that relief may be destructive to the recipient; in fact, it was the recognition that it often is destructive that led to the development of means of protecting applicants from that bad experience.

With the techniques that are used to put this new point of view into effect we cannot be concerned here, but a brief elaboration of the general theory may make the position clearer. One of its main points is that clients should be helped to see that they do not "get something for nothing." What they get is something that they as citizens had a part in determining and paying for and that they can secure only by taking a responsible part in establishing their eligibility and their evidence of continued need. The first part of this proposition was always more or less true in democratic countries but it is often overlooked in the distinction between the "general community" and the applicant for relief. A clear recognition of the public character of relief makes the social worker in a relief agency a true "servant of the people" and enables him to meet each applicant without suspicion or sentimentality but with the dignified consideration appropriate to the applicant's position as a citizen inquiring about his "rights."

Such a conception by the social worker of his role in the transaction enables him to help the applicant free himself of the demoralizing attitudes that the early leaders of the C.O.S. rightly held were associated with having to beg for help from a stranger. Similarly, with the recognition that the social worker is not a private individual wielding power in his own right, an impersonal and professional element is introduced into relief giving, and the applicant can feel free to discuss with the social worker—as with a doctor or a lawyer—his situation and his desires and fears without loss of self-respect. This again, it will be seen, was a condition the founders of the C.O.S. were trying to attain. They tried to do it by substituting "friends" for relief officers, but case work experience over the years has shown that the essential element in that relationship is not personal friendship but professional responsibility for the task at hand.

These attitudes on the part of the social worker do not *ipso facto* create corresponding attitudes on the part of the applicant (though they

doubtless do so in many cases), but they set the tone of the application interview and direct the social worker's activities. The situation is seen clearly as one in which money has been appropriated for the relief of certain types of distress; it is not the social worker's duty to save the money but to spend it for the stated purposes. Consequently, the social worker, standing between the funds to be expended and those who seek assistance, has the task both of helping the applicant to prepare his statement of need and eligibility and of judging whether the situation therein described is one to which the law refers.

In addition to stressing the importance of the representative and professional character of the social worker's activities, modern case work theory holds that case workers can be of benefit to clients only through respecting and fostering their sense of self-responsibility. The early charity organization societies were criticized, it will be remembered, for the control their workers assumed over their clients' lives. Modern case work not only seeks to leave such control in the client's hands but sees in the aid the social worker gives to the client in assuming control one of its most important values.

The application of this principle to public relief work has aroused considerable debate, for it is at cross-purposes with many earlier conceptions about the right of those who give money to dictate how it shall be spent. Involved also is the question of how to conduct the investigation into personal circumstances on which eligibility for assistance is based. These difficulties are partially overcome by making the applicant responsible for assembling the material for proving his eligibility, for registering with an employment exchange, for facilitating the checking of work records and residence history, and by explaining these requirements to him in such a way that he will see them as his part in the mutual enterprise.

So much for the "giving" side of the relationship. On the "receiving" side difficulties are also encountered, and skill must be used to prevent the experience from being one which increases dependency or antagonism. It is popularly believed, as has been said before, that most people are eager to "get their share" of any relief money which is available. Actually, the experience of social workers shows that the number of "chiselers" is relatively small and that for many people the experience of having to ask for financial assistance is very painful. Social workers know, moreover, that one defense against pain may be an inert acceptance of a state of dependency, and that it is conse-

quently very important to help people to become clear about their feelings in regard to taking money.

Some Illustrative Cases

Some of the problems connected with the giving and receiving of financial assistance are illustrated in the following cases. The first one shows that the apparently very objective requirements for establishing eligibility (residence and employment history, present sources of income, names and addresses of relatives, and so on) may have unsuspected complications and meanings for an applicant, that a person may apply for relief and still not be at all sure that he really wants it, and that if he is given money without any recognition of what it means to him he may be definitely handicapped in the struggle to maintain his self-respect.

Case 3 [28]

The applicant was a young Negro man, and the factor to be cleared up was the matter of his residence. The client seemed "co-operative," he seemed to be destitute; then why should the simple fact of length of residence remain unclear? With great persistence the worker and the client searched for someone who could testify to his residence. The worker made seven visits to references without results. She was about to give the man relief (to find some basis on which she could do it) when she got some realization of his struggle: his wanting to get relief and, at the same time, his hesitation at accepting it from the agency.

The worker then expressed sympathy for the man, saying how difficult the whole situation must be for him. At that remark he revealed some of his feeling about coming North, his fears as to what place there would be for a colored family, how he would be received. He had come originally to get a job, but deep inside there was a fear he had never admitted to himself—that relief might satisfy him just as well eventually. He felt like a sneak and he wanted to be honest. He did not want to be only tolerated. To establish a real place for himself in his own way would be better. That would be challenging. But if he should fail in this he might need relief; then he might be grateful and even come to like it. And what would "the welfare" think?

The worker could only acknowledge that these were problems for which she had profound respect. But that was enough. That acknowledgment meant to him that he was at last able to establish without any question the fact of his residence. There was something clear between

[28] *Ibid.*, pp. 18–20.

them. And finally and most important of all, as a result of further clarification he left with the understanding of how far he could use the agency. If there were resources at his command, the agency expected him to use them. He already had something new to call upon, more confidence in the strength in himself.

The second case shows that clients may deeply resent relief even while they are receiving it and that its withdrawal may sometimes stimulate them to take a more responsible part in their own maintenance, if the withdrawal is done in such a way as to avoid feelings of anger and persecution.

Case 4 [29]

Mrs. Day was a lone, middle-aged colored woman. At one time she had earned a meager living from day work augmented by rent from roomers. She had rented the same house for many years, and it was filled with dingy but beloved household goods. Since both the shelter item and the fuel item of the agency's budget were scaled according to the number of individuals receiving relief in a household and not to the number of rooms to be heated, the allowance for one person in no way adequately supported a house of any size. Mrs. Day had long since lost day work, but, because of the low rental, managed precariously with the help of a cash grant from the public relief agency which supplemented her income from two roomers. She had displayed a particularly defensive attitude toward receiving relief. She would talk with voluble irritability about her extreme needs but answered questions about her income or expenditures with monosyllables or stubborn silence.

Due to a change in policy in computing income from roomers, Mrs. Day was found to be eligible for less than one dollar weekly in relief money. Since according to agency regulations amounts of less than one dollar were not granted, this obviously left her without any relief grant.

To reject this lone, elderly woman was difficult, but was undeniably the worker's task. She tried once without success because she was scared off by Mrs. Day's hostile "Why are you here to bother me again" attitude. Then she called again and without the usual preliminary pleasantries explained the purpose of her visit, working the facts out in figures so that the client could visualize her budget and obtain a clear understanding of the reasons for her ineligibility. Mrs. Day said so little that the visitor wondered whether or not she had understood her. Then Mrs. Day began to talk of day work she had had in previous years, of the roomers and

[29] Sarah S. Hughes, "Interpreting Function to the Visitor," *Journal of Social Work Process,* II (1938), 69–71.

boarders she had kept. Recently two men had asked her for room and board but she had refused, fearing she might lose her cash grant. She thought they might come to live with her now. It would be pleasant to have more people around her. Mrs. Day was quite matter of fact and discussed the expenses and possible profit to her of keeping boarders. She invited the worker to visit her again when in the neighborhood.

This case suggests also the difficulties that clients experience in trying to understand relief regulations and their fear of doing anything to upset the *status quo*. This in itself may handicap their efforts to become self-maintaining, and is another reason why skilled case workers are needed in a relief program. The following case illustrates this point more clearly and shows, in addition, something of what is meant by using case work methods (that process of individualizing even within the framework of rigid rules) with relief clients after eligibility has been established.

Case 5 [30]

Mrs. Esposito's industrious hands kept their small house spotless, despite its worn furnishings. Mr. Esposito was a proud and honest man. He still talked of the good job he had until "the big boss lost everything," forcing them to ask aid. When Antoinette or the other youngsters brought home a fine report card Mr. Esposito blessed them and marched proudly about to show his neighbors. During their four years on relief, all the workers had thought them a "really nice family."

The trouble began with Antoinette's confirmation. Mrs. Esposito had first mentioned it, laying down her crocheting to emphasize how important it was for Antoinette to have a new outfit for the occasion. Her dress, shoes, stockings, a veil and underwear could all be provided if the Espositos could be granted $10 for clothing from the relief agency. When the worker explained that the small sum available for clothes must buy school shoes for many other children, Mrs. Esposito was genuinely worried. They had planned so on the money. All the other girls would look so fine, and her poor Antoinette! People would talk. "The Espositos," they would say, "are bums." What would she do?

The worker had almost forgotten the incident when, a few weeks later, a neighbor of the Espositos spoke bitterly of them. How could a family on relief have big parties? Where did Antoinette get a confirmation dress that costs more money than her granddaughter's? How about the "new things" that the family bought for their house? "The Espositos," she said, "are fooling the relief."

[30] Cited by Vivian Di Lallo, *op. cit.*, pp. 20, 23.

The worker was uneasy. Had she been "taken in" by a family whose sincerity and integrity she had accepted? She reviewed her knowledge of the Esposito family's resources. Mr. Esposito, an unskilled laborer who had been out of work for five years, was now 52. The bosses didn't like old men, he said, when explaining why he hadn't found work. The worker remembered two or three visits when Mr. Esposito was not home. His wife had said he was in the park, or playing cards with friends, "because it was no good for a man to stay home all day; it made him crazy!" Was Mr. Esposito working, perhaps? Then there were the pigeons which were his main diversion. He would talk about them endlessly. Was he breeding and selling them, or was it merely—as he said—a pastime that kept him out of the kitchen? There was, too, Mrs. Esposito's activity. Always her dexterous hands were crocheting—collars, booties, chair backs. Once she had made 50 cents by selling a baby bonnet. Was there, somewhere, a resource the Espositos were hiding from the worker? Why? And how great?

When the worker visited, Mrs. Esposito shrugged and said, when asked how things were, "Just the same." Yet there undeniably was a picture of Antoinette, stiffly posed in new confirmation clothes. There were new curtains, and the kitchen linoleum was surely a recent purchase. Mrs. Esposito was embarrassed when she saw the worker observe the picture and her new furnishings. She laughed nervously and, pointing to the picture, hastened to explain. Antoinette had such a good godfather. Every birthday, every Christmas, there was a present for her, and when he found Antoinette crying because she would have no new clothes for confirmation, he paid for the things even though he was a poor man. Mrs. Esposito went on talking about Mr. Navaro, the godfather. She told of how he and her husband had come from the old country as youths together, how the families went to picnics and church affairs together, etc. The curtains and the linoleum? Didn't the worker understand that to have these things was more important than food? Meals could be skimped on if necessary but she could not have a shabby house when her friends came to "make the confirmation party." Mr. Esposito angrily took part in the discussion. If he should earn a dollar it would be taken off the budget and what good would it do him?

From the guilty glances the Espositos exchanged at this point the worker was sure there was some work. How much? And why was the family hiding it? The worker explained that allowance could be made for employment expenses, but employment meant more than a changed allowance. It would mean that Mr. Esposito was helping to provide for his family. The agency could continue to help if the needs of the family were not completely met. The Espositos seemed relieved as they told the worker of the three dollars earned doing hand work for a neighbor's trousseau.

They wanted to be honest and were glad the worker had explained things because they were not "crooked people." They had a genuine fear that any income might make them ineligible for relief.

Special Problems in Work with the Aged, the Blind, and Dependent Children

These examples have been taken from the field of "general" relief. Equally important and difficult tasks are put on social workers who are employed to dispense "categorical" assistance—aid to the blind, to aged persons, and to dependent children. In some states and in some counties of other states these groups are served by the organization that dispenses general relief as well, while in others there are separate administrations for the various services. Many of the problems connected with giving financial assistance to these categories of people are similar to those described above. The following episode from a case record of an old man who was receiving old-age assistance is illustrative of a common difficulty that relief clients encounter in using the public agency's services: that is, a lack of clarity about what limits the receipt of relief sets upon their accustomed activities, or—to state the matter in their own terms—what they are allowed to do and what they can expect the relief worker to do for them.

Case 6

On Saturday of last week, November 14, 1940, Mr. S. came to the office to see his worker. She was in the field. He asked for the supervisor, whose day off it was. He seemed so disturbed that the receptionist asked if I would see him.

He came into my office—an apologetic, stooped but bright-eyed man. "I'm sorry, please, but I'm afraid," he started in very broken English, and went on to explain that he didn't want to make us "mad" but he wanted "justice." Did I not know all about him? I asked him to sit down and tell me about it. I told him who I was and why I didn't know all about him, that if I couldn't help him the worker would visit on Monday or Tuesday. He said "please" to let him tell me.

He was seventy-one and getting old-age assistance, for which he was so thankful; but if he needed the rent and didn't get it, would we be "mad" if he put his tenants out? In a most timid and childlike way he told of an ADC[31] mother who had come to him with a hard luck story

[31] Aid to Dependent Children.

and he had taken her in—"we are just alike." She had paid her rent for several weeks but now was refusing because he got relief too. She was dirty and refused to keep his apartment clean. She had apparently made fun of him and belittled him for liking the worker and being satisfied. Would we make her move was his request; or would we be "mad" if he put her out? I explained to him his rights as an owner of property, the law about set-outs, where to get them, and explained that we would never be mad if he acted within his right as a landlord; the fact that he or the tenant was a client made no difference. He seemed pleased and tried to explain, again apologizing for not being able to speak English, that he was glad we considered him a "free citizen." He smiled and I thought he was going to leave and I smiled too. Then he pulled his chair a little closer and asked, "Would you make them move?" I explained how the tenants were "free citizens" too, and their business arrangements, like his, were of their own making and that we would not make them move. His face fell and he fumbled with his hat—"Please but I'm sorry for him—he's sick."

Then came the real reason, perhaps, for his visit. The father in the case was hopelessly paralyzed, and Mr. S. could not bring himself to put the family on the street. I explained this to him and showed him how we could not take the bad job from him and save him the worry; that if he was a "good landlord" or a "bad one" he would have to decide for himself, but that we would not be mad at him either way. I pointed out that I guessed he was afraid the tenants would be mad at him. Tears came in his eyes, and he picked at the knee of his trousers. I waited for him to speak. Finally he said, "Please, I thank you." I knew that he understood. He rose and held out his hand and stood a little straighter. "I will go to the court on Monday, but I'll tell them today. Maybe they can find a place."

In addition to problems associated with asking for assistance, demonstrating eligibility, and working out an understanding of rights and duties, aid to the aged, the blind, and dependent children may involve other characteristic difficulties with which a social worker may be of help. With the aged,[32] there is frequently need for special assistance with medical problems, diet, resources for nursing and custodial care, as well as for help in planning how to live on the limited

[32] For an interesting description of the kinds of problems encountered with aged persons as illustrated by one case see "Case Record," *Social Service Review,* XII (1936), 651–85. Further illustrations of the various aspects of the job of the old-age assistance worker are to be found in Elizabeth S. Dixon and Grace A. Browning, *Social Case Records,* University of Chicago Press, Chicago, 1938, pp. 298–307.

grants.[33] For the blind, various training and preventive measures are often so clearly indicated that many states have authorized their welfare departments to provide such services or to co-operate with other agencies that already provide them.

As to dependent children, a wider range of problems appears, for both eligibility for aid and the kind of services that should be made available once aid is granted are difficult to determine. Provisions restricting aid to parents of good character have disappeared from the laws of most states, but the requirement that children who receive assistance shall live in "suitable" homes necessitates the making of judgments that are far from objective. The persons to whom responsibility for passing on eligibility is delegated must maintain a fine balance between the community's standards—especially since illegitimate children are also included under the states' provisions—and the children's needs. Many homes that might be regarded as unsuitable make up in affection for what they lack in cleanliness and even moral standards, so that it is impossible to make a rigid division into blacks and whites and still act in the children's best interests. Once accepted for assistance, children and their families are subject, in most states, to more supervision than are the clients of relief agencies, for the very setting up of special funds for their care is frequently held to imply that the state has a special interest in their welfare.

For these and other reasons social workers have been widely used in aid-to-dependent-children programs. Nevertheless, there is still considerable question as to the proper scope of their services. Should they limit their activities, as in general relief agencies, to help in regard to establishing eligibility and use of the assistance grants, or should they act in the capacity of child welfare workers, offering help in the total area of child nurture and care? The case against the latter would seem arguable on somewhat the same grounds as that against making general relief equivalent to family welfare work. Mothers and other relatives who seek financial assistance for their dependent children do so on the basis of legal rights and not because of their desire for help with the manifold other problems of child rearing. On the other hand, it may be held that aid is offered to dependent children in order to give them the benefits of "normal" family life, and that supervision of

[33] The average old-age allowance was about $19.00 a month for the country as a whole in 1938, with a range from $6.37 in Mississippi to $32.39 in California.—Alvin Roseman, "Old Age Assistance," *Annals of the American Academy of Political and Social Science*, CCII (March, 1939), 55.

their care must be maintained so that this is assured them. We shall have more to say about this in a later chapter in which the place of social work in child welfare programs is discussed.[34]

Some Consequences of Differentiating between Social Work and Poor Relief

This survey of principles and practices in public assistance provides us with data for answering the question with which this chapter and Chapter VII started: the relation of social work to public relief. It is held by many authorities that public relief is a part of social work, but the preceding account of the numerous means by which the financial needs of the poor have been met in England and the United States over hundreds of years and which are still in use would seem to contradict that conclusion, unless social work and the relief of poverty are held to be synonymous terms. From the institutional point of view, it would appear more accurate to recognize that means of dealing with extreme poverty have always been employed and that frequently they have been of such an organized character as to warrant their classification as social institutions.

Social work originated in an attempt to alter the institution of relief-giving but soon became an institution in its own right and with a distinctive function. That function we have found to consist of helping individuals to make effective use of the services of organized groups or to play their part as members of such groups. Social work that is concerned with the latter aspect of the function is usually carried on through independent organizations (such as family welfare or child placement agencies), while that which is concerned with the former aspect usually operates within organizations primarily set up to fulfill another purpose—such as schools, courts, or hospitals.

Social work in public relief presents a situation somewhat different from either of these. In contrast to the services of a hospital or a school, the service that social workers in a relief agency help their clients to use is not one, such as medical therapy or education, that is offered by some other professional group, but one (money) that they themselves dispense. This creates peculiar difficulties in the actual practice of the work and may require the development of special techniques. On the other hand, recognizing that public relief is an independent institution and not a part of social work clarifies certain other-

[34] See Chapter XIII.

wise confused issues and facilitates the adaptation of social work to its needs.

In the first place, this conclusion about the nature of public relief aligns present relief organizations, public or private, squarely with their historical antecedents. We have seen that for centuries western civilization has been trying to deal with the problem of economic distress through the organized activities of church, state, and private philanthropy. The present relief systems are a part of that picture, as are the social insurance and other devices by which the institutional organization of society has been adapted to meet economic needs. In the carrying on of their work, the administrators of these systems—like the administrators of hospitals or schools—may or may not make use of the services of social workers, depending on whether they think that kind of help is needed. But the institution of poor relief—in its modern or ancient guise—stands, by this analysis, as an activity in its own right and with its own function and is not to be regarded as good or poor social work.

In the second place, the recognition that social work is auxiliary to the giving of financial assistance by public authorities clarifies its function within that setting and distinguishes it from that of family welfare work. Because social work originated in protest against the bad consequences of earlier poor relief practices and sought to restore pauperized individuals to self-maintenance, it is often assumed that social work always has that objective when it deals with the giving of relief. It will be remembered, however, that the charity organization societies operated outside the structure of organized poor relief and used financial assistance only as a means of carrying out plans for rehabilitation that were based on studies of their clients' capacities and needs. The work was directed toward helping people to restore themselves to normal functioning in family or economic relationships; it was, in other words, the beginning of family welfare work.

This work developed tremendously between the time of the founding of the London C.O.S. and the economic depression of the 1930's, and its objectives engaged so much of the attention of social workers that it was probably natural that an attempt should have been made to carry them over to the public relief field at the time of its reorganization. This plan worked poorly and led to much confusion, social workers maintaining that the case loads of public agencies were too heavy for effective work, and administrators feeling that social workers often far overstepped their duties in trying to help their clients

readjust their lives. The dispute is still far from settled, and some administrators—even some of those who at one time had social workers on their staff—still see no place for social work in relief agencies. If, however, it is recognized that the function of social work within a relief organization is to help individuals with problems connected with their accepting and using financial assistance rather than with the larger problems of family and economic life, the dispute moves to clearer ground: that of questioning whether such case work service is needed. At the same time the distinction between public relief and family welfare work is clarified, with consequences that will be discussed in the next chapter.

A final consequence of recognizing that social work and poor relief are not equivalent services is the further substantiation of our often-repeated principle that social work cannot be defined in terms of the economic status of its clients. Social work, it becomes increasingly clear, is a way of helping people with the difficulties they encounter in making use of social institutions. That the difficulties that first attracted attention and led to the organization of social work activities were those of poverty is due to the fact that money is so important a means of meeting basic needs in modern communities. Nevertheless, social work originated not in the giving of money and other material assistance but in the attempt to cope with the difficulties that the giving and receiving and denying of assistance created in the individuals who were applying for help. The original aim of social work was to remove from the position of having to ask for financial aid as many of these people as were willing to help themselves, leaving to the poor law authorities only those who were unwilling to make use of social work services. The economic impossibility of such a plan was only slowly recognized, and even more slowly has social work moved into the area of helping administrators and clients to use relief and yet avoid its damaging consequences.

Social work, therefore, operates in the field of relief as it does in other fields: assisting on a case-by-case basis with the solution of difficulties that individuals encounter in using an institution's services. In helping clients to handle their feelings with regard to accepting and using relief and to find a way out of the dependency situation through their own efforts, social work in a relief agency frequently accomplishes in an indirect manner much of what the founders of the London C.O.S. aimed to achieve. To do this within the framework of public

relief, which for centuries unfitted people for self-responsibility, is a notable achievement.

Suggestions for Further Study

Abbott, Edith, *Public Assistance.* Vol. I, *American Principles and Policies,* University of Chicago Press, Chicago, 1940.

The first of four projected volumes which "represent an attempt to set out the basic principles and policies of the American public assistance system of the present day, without any attempt to discuss the new forms of public aid that have developed since the Social Security Act became effective. . . . The analysis is in terms of legal rights and public responsibility, and much documentary material is included."

Abbott, Edith, *Some American Pioneers in Social Welfare,* University of Chicago Press, Chicago, 1938.

Documents and editorial notes about such subjects as the arguments about outdoor versus indoor relief in the 1870's, the first child-placing services, early hospitals, etc. Gives a vivid picture of social conditions and values.

Abbott, Grace, *From Relief to Social Security: The Development of the New Public Welfare Services and Their Administration,* University of Chicago Press, Chicago, 1941.

A collection of papers on various aspects of this subject.

"Appraising the Social Security Program," *Annals of the American Academy of Political and Social Science,* Vol. 202 (March, 1939).

This volume of the journal contains articles on various phases of the social security system; written by persons who are in a position to describe its problems and judge its accomplishments.

Brown, Josephine. *Public Relief, 1929–1939,* Henry Holt and Company, New York, 1940.

A detailed account (without much critical evaluation) of the federal and state relief programs that were worked out during the 1930's.

Dexter, Elizabeth, "New Concepts and Old People," *National Conference of Social Work* (1939), pp. 381–89.

Discussion of the application of "modern" case work principles to work with the aged.

Journal of Social Work Process, Vol. II (1938).

The articles in this number of the journal are devoted to examining the role of case work in public assistance. They may be too technical for the general reader, but at least the cases cited will serve to illustrate further some of the points made in this chapter.

Kahn, Dorothy, "Conserving Human Values in Relief Programs," *National Conference of Social Work* (1941), pp. 308–19.

Kahn, Dorothy, "Unemployment and Its Treatment in the United States," *American Association of Social Workers* (1937).

A report prepared for the Third International Conference of Social Work. It presents basic information about the relief of unemployment, 1930–36, without appraisal or criticism.

Kelso, Robert, *The Science of Public Welfare,* Henry Holt and Company, New York, 1928.

Chapter XII describes state and municipal relief systems before 1930, and some of the earlier efforts.

Kurtz, Russell, *The Public Assistance Worker,* Russell Sage Foundation, New York, 1938.

A collection of papers addressed to public assistance workers (especially those who have not received professional training) as an aid to understanding the background and daily requirements of their job. The chapter by Donald Howard on eligibility is particularly pertinent.

Lane, Marie Dresden, and Frances Steegmuller, *America on Relief,* Harcourt, Brace and Company, New York, 1938.

A popular account of the federal program for the relief of economic distress and some of the problems that were met in making them serviceable to certain groups of people.

"Pendings and Collaterals," *Social Work Today,* Volumes VII and VIII.

This is a "department" of a monthly periodical which contains many examples of case work in New York City's public assistance agencies.

Reed, Ellery, "What Turning Relief Back to the Local Community Meant in Cincinnati," *Social Service Review,* XII (1938), 1–20.

Social Security in America: the Factual Background of the Social Security Act as Summarized from Staff Reports to the Committee on Economic Security, Social Security Board, U. S. Government Printing Office, Washington, D. C., 1937.

"This Business of Relief," *Proceedings of the 1936 Delegate Conference,* American Association of Social Workers, New York, 1936.

"The series of papers assembled in this volume set forth the various aspects of relief known to social workers, the important facts about people who need relief, prevalent misconceptions in regard to them, an examination of the work, security, and private programs, a consideration of facts about local and state resources, and a summary and review of past events and circumstances."

Chapter XI

THE PRESENT PRACTICE OF FAMILY WELFARE WORK

With the distinction between the work of public assistance agencies and family welfare agencies somewhat clarified by our analysis of the function of social work in the public assistance program, we are now in a position to consider, in more detail than the subject matter of Chapter VII permitted, the nature of the present work of family welfare organizations. These agencies, as successors of the charity organization societies and inheritors of their long tradition of relieving and eliminating poverty, have represented both the most progressive and the most conservative forces in social work. It was under their auspices that many advances in case work were made, and yet their leaders have encountered great difficulty in defining for themselves and for the public the exact nature of their services. The reasons for their shift of interest from relief giving to family welfare, which has been described above, have never been very adequately explained to the contributing public, perhaps because the part which money plays in the effective functioning of a family has not been clearly understood. There has accordingly been much confusion in the minds of both lay and professional people about the purpose of family welfare work, the public tending to regard the agencies primarily as sources of charity for the deserving poor, and many in the profession tending to belittle relief and to stress the "service" aspect of their work.

Current Conceptions about the Purpose of Family Welfare Work

The conflict of opinion about the main purpose of family welfare work came to a head during the early years of the economic depression of the 1930's, for, as has been described in Chapter X, public relief services were then greatly expanded, with a consequent increase both in taxation and in the general public's doubt as to the need for

private philanthropy. Family agencies met the challenge to their existence in various ways. The more old-fashioned argued that their work of relief and charity organization was still needed because many people were not adequately cared for by the new public agencies. Those that had been doing the most experimenting with psychiatric methods were inclined to renounce—or at least to minimize—their relief function and to offer a wide variety of services in the area of personality problems, some of which would have made the agencies practically mental hygiene clinics. Others tried to give more specific content to the conception of family welfare and to work out the distinction between financial assistance as a means of preserving "health and decency," which they saw as the purpose of the public relief services, and financial assistance as one of the numerous kinds of aid family agencies could offer toward preserving and promoting family life.

The latter appears to be the predominant trend in the current thinking of family welfare workers, though agencies that operate on one or the other of the premises are still numerous. According to this newest point of view, the agencies accept as clients people who come to them for help in problems of family relationships, economic or not as the case may be. They attempt to confine their services to those who can make constructive use of them, insisting that their province is not that of keeping people fed, clothed, and housed but of helping them work out a solution to their family difficulties. Since many of those difficulties spring from lack of money, the agencies try to provide funds if it appears that a temporary increase of income will facilitate long-time adjustments but—partly because of limited revenues—they are reluctant to undertake protracted financial assistance.

It is here that their policies and their conception of their function are put most severely to the test. In spite of the greatly broadened public welfare program, it is a fact that many needy families are ineligible for public assistance. Some of these families require only a steady income to maintain a healthy family existence, and others cannot do well, regardless of income, except under long-continued supervision. Family welfare workers are inclined to say that neither of these types are the ones their agencies are especially designed to help. They cannot undertake to make up for the failings of the economic system by providing long-time maintenance, or to act as parents, nurses, or wardens for those who cannot, even with help, manage their own lives. The agencies do, however, frequently give temporary financial assistance to families that seem to need only a small "lift" to insure

their self-sufficiency; and they also carry on some "supportive work" with individuals (usually parents) when the welfare of the family group seems to depend on this sort of supervision and encouragement.

These policies, slowly hammered out during the depression years, add weight to our earlier conclusion that it is not the function of social work to remedy other institutions or to provide substitutes for them, but that its task is to help individuals who are in difficulty with respect to some aspect of their institutional relationships to find a way to function effectively in an organized group. The institutional relationships with which family welfare agencies are concerned are those of the family, and their clients' other relationships (such as the husband's employment difficulties or a child's relations in school) come into the agencies' purview only as they affect family life. If such agencies appear to have many functions, as is often claimed, it is only because the family itself serves many purposes. The agencies' help is offered toward the furthering of all family ends (housekeeping, child rearing, the provision of food and shelter, and so on), but it is basically directed toward helping family members utilize their own capacities in their own way for effective family life.

The Kinds of Problems with Which Family Agencies Deal

It has been suggested in the previous chapter that the key to the distinction between family welfare and public assistance agencies is to be found in the fact that the former are social work institutions, while the latter are institutions that form part of the economic arrangements of society. Public assistance agencies have as their function the providing of the basic economic necessities of life to individuals who cannot secure support from the usual sources (jobs in private or public employment, accumulated capital, or the earnings of relatives), are not eligible for pensions or other forms of compensation for lack of work, or are handicapped by age or physical disability. Family welfare agencies, in contrast, perform a social work function: that is, they provide assistance to individuals in meeting the problems that arise in connection with the utilization of some other social institution—in this case, the family. It follows, therefore, that the problems with which family agencies give help parallel closely the functions which the family as a social institution serves.

The major difficulties that arise in family life are those that represent an inability of individual members to carry out the duties that

custom assigns to them or to find satisfaction in family relationships. It is through the institution of the family that sexual relationships are regularized, food and clothing for the group are provided, an independent dwelling place is customarily maintained; care in illness and during pregnancy and childbirth is provided through the family, children are nurtured and guided, and a stability in affectional relationships is procured. These and other functions of the family entail the performance of specific tasks by various family members and an adjustment of individual desires to the common good.

The satisfactory performance of many of these functions is contingent upon the possession of money, and for that reason the services of family welfare agencies often include the giving of financial assistance.[1] Family agencies, however, do not limit their clientele to the poor, for problems in family life occur in every economic level of society. Nevertheless, people with adequate funds have a wider variety of means at their disposal for dealing with their problems; hence, as long as family welfare work savors of charity—in the opinion of the public—it is unlikely that many economically secure families will make use of family agencies' other services, and the clientele of the agencies will be largely limited to families that are economically handicapped.[2]

Lack of money keeps many young married couples from setting up independent households and forces them to live with relatives, with a consequent increase in their difficulties in working out an adjustment to each other. Lack of money handicaps girls who are illegitimately pregnant, in that they find difficulty in securing the care for themselves and their children that a legally sanctioned family would normally provide. Lack of money in a family leads to malnourishment and inadequate health care, with attendant worries on the part of parents and a probable increase of friction in family life. The examples

[1] Expenditures for relief by family welfare agencies, however, accounted for only 2 per cent of the total relief grants given in 29 urban areas in 1938. The total relief expenditures of private family agencies was only 48¢ per capita population in these areas as against $5.59 for general public relief. The addition of federal work relief payments and social security assistance brought the per capita expenditure from public funds up to $31.68. On the other hand, 52 per cent of the receipts of private family agencies were spent for relief to clients.—*The Community Welfare Picture in 29 Urban Areas, 1938,* United States Children's Bureau, U. S. Department of Labor, 1939.

[2] Exact figures in regard to the economic status of family welfare clients are difficult to secure and vary greatly from time to time, depending on the general economic situation, the private agencies' finances and policies, and the public relief resources. For a study of this point, covering eight typical family welfare agencies in 1934, see Helen Leland Witmer and Students, "Current Practices in Intake and Services in Family Welfare Organizations," *Smith College Studies in Social Work,* VI (1935), 99–209.

could easily be multiplied, but these are doubtless sufficient to indicate that no organization that sets out to give assistance with the problems that individuals encounter in playing their part in family groups can ignore the economic question. Nevertheless, as later analysis will show, the services of family welfare organizations are such that they would not need to be confined to people who have little money; and it has been for years the aim of many such organizations to extend their services to families regardless of economic status.

Some of the kinds of problems that bring applicants to family welfare agencies are those described in the preceding examples. Others are indicated by requests for a loan or grant that will enable the normal wage earner to get started on a job and so fulfill his function of supporting his wife and children. Then there are requests for temporary allotments to tide otherwise self-sufficient families over critical situations; for regular supplements to inadequate wages or relief allowances because of the presence of special needs; for lump sums of money to purchase equipment—such as medical appliances—that are necessary for health and for the effective carrying out of family duties; and for general maintenance because of inability to meet the eligibility requirements of public assistance agencies. Two examples of requests of this nature and the situations that occasioned them are the following. They were taken at random from the files of a family welfare society of a large city.

Case 7 [3]

Mrs. Goldberg, an attractive Jewish woman about fifty-five years old, came to the office to ask for help in regard to a plan she and her husband had made for setting up a small business. The Goldbergs had been clients of the agency several times in the last five years. Originally they had come to the agency on referral from the public relief office for assistance with their large medical expenses. At that time they were living in very dilapidated quarters in a condemned building. Mr. Goldberg was crippled and bedridden with arthritis. A suitable apartment was found for them, medical expenses were cut down by use of a clinic, and Mrs. Goldberg secured work under WPA. In consequence Mr. Goldberg emerged from his melancholy state of mind, and family affairs went much better.

At the time of the present request Mrs. Goldberg had been laid off WPA and the family was living on an eight-dollar-a-week allowance from

[3] Condensed from a case record of a client of the Jewish Welfare Society, Philadelphia.

the public agency. Mr. Goldberg had improved considerably in health and had been doing odd jobs fixing electric irons and sweepers. In their neighborhood, however, there was little call for this kind of work. Mrs. Goldberg said that what they had thought of doing was to rent a small apartment with a store front, where Mr. Goldberg could sit (he was still badly handicapped with arthritis) and take in work as it came along. They were not sure that the doctors at the hospital would approve of this plan but would get a statement from them if the agency were willing to assist them with it. They knew of an apartment of this sort that could be procured for $25 a month, and an electrical supply company had offered to advance the necessary equipment to them. What was needed, therefore, was the agency's help with the rent for at least one month.

The case worker told Mrs. Goldberg that this sounded like a feasible plan, but she and the Goldbergs would have to look into what was involved in it. There was the fact, for instance, that the public relief allowance would probably be cut off. The question of Mr. Goldberg's health would have to be gone into. The business possibilities would have to be explored in a bit more detail. An interview with Mr. Goldberg would need to be arranged, so that the agency would know more clearly what his plans about the matter were. Mrs. Goldberg said she would get a note from the doctor, check on the electrical company's plans, and discuss the question of the ending of public relief with her husband.

Case 8 [4]

Mrs. Shaw, a large stout woman, neatly dressed, requested the agency's assistance during a period in which she would have a tonsillectomy. She was a garment worker who supported her son, aged nine, and herself on a weekly wage of $17 to $20. Work was now slack, and the doctor recommended that she now have her tonsils out, for their bad condition was undermining her health. She had been laid off, but she was very sure she would be re-employed, especially if she could learn to operate a button-sewing machine. In the meantime it seemed absolutely necessary to have the operation, for she had been finding it increasingly difficult to work. She was not asking for help with the rent, which she had already set aside enough money to pay for, but she would need some money to see her through her illness. A telephone call to the hospital confirmed the necessity for the operation. The question of securing relief from the public agency was discussed, but it did not seem feasible because there would be a waiting period of several weeks. In addition, Mrs. Shaw was most reluctant to apply there, feeling public relief was something of a disgrace. She reiterated her confidence in getting back on a job as soon as her operation was performed. Her previous job history seemed to confirm this

[4] *Ibid.*

hope, so that the case worker—after further inquiries—granted her the usual public relief allowance of eight dollars a week.

Problems whose solution requires the granting of money usually appear in combination with others with which family agencies are prepared to give help. Very common among the latter are those that involve housing arrangements and household management. Questions about the care of relatives are frequent: for example, aged or disabled individuals for whom plans must be worked out and practical arrangements made; unemployed and unemployable persons who become a charge on a family and threaten to disrupt its emotional stability; others living apart from the family but who are nevertheless its responsibility.

Then there are numerous situations in which the wage earner or the housewife becomes incapacitated, with consequent drain on the remaining family members' time and energy and on the general domestic arrangements. Perhaps the father is ill, and the crowded living quarters do not permit him the needed rest and the children their needed play space. Perhaps, for one reason or another, the mother cannot perform her usual duties, and domestic harmony is disappearing under the strain of the burdens this imposes on the rest of the family. Again it may be that the husband or wife is perturbed about the other's inability to plan or manage the household funds. Budgeting of slender resources may be the question at issue, a problem that comes to a head when the family must depend upon the small grants allowed by public assistance agencies. These are but a few of the great variety of situations in which lack of money combines with other problems to handicap family life.

The following example shows one such situation—one, moreover, in which it was finally decided that the applicant would not be able to use the kind of assistance the family agency had to offer. This case accordingly illustrates the current family agency policy of limiting financial assistance largely to families that not only are in need of money but that give evidence of being able to use money to carry on their family duties effectively.

Case 9 [5]

This case was first known to the agency a year prior to the present application. At that time Mrs. Bowers came to the office to ask that the

[5] *Ibid.*

agency find a home for her three children, two to four years old. The case was referred to a placement agency, but the worker there suggested that the Bowers again return to the family agency, for Mrs. Bowers really did not seem to want to give the children up and there seemed to be much marital difficulty with which the family agency might be helpful. After considerable discussion with Mr. and Mrs. Bowers, the agency did give them assistance in setting up a home together, for, although neither of them seemed to be at all stable individuals, they had great love for their children. The plan included making use of the day nursery during Mrs. Bowers' working hours, for Mr. Bowers' wages were very low; but the plan was never successful. Mrs. Bowers finally concluded that she would have to place the children after all, for she could not manage a house, care for the children, and work in a factory. Mr. Bowers' wages continued to be very low. In addition he had much difficulty with his feet, which he used as a reason for not considering it necessary to support his children. He told the case worker frequently that he disliked his wife and wanted to leave her. All in all, it was concluded after a few months that the Bowers' were definitely inadequate to maintain a home for the children, and, with their consent, placement was arranged.

After a few months, however, Mrs. Bowers again came to the family welfare office, saying that she must have her children back. She said she had placed the children because there was a good deal of confusion and upset in the household, and she and her husband had thought they had better go out and earn some money and let somebody else care for the children for a time. Now, however, both of them were terribly lonesome for the children. She felt miserable every time she visited them. The worker asked how Mr. Bowers felt about this, and Mrs. Bowers replied that he too wanted the children back but he could not see himself assuming financial responsibility; he felt that that would be a little bit too much for them. Mrs. Bowers said she agreed with him. She could not possibly work and take care of the children at the same time, and that was why she had come to the agency for help.

The worker said she could believe this but the agency could not enter into an indefinite plan for support. Mrs. Bowers said that since she did not have a year's residence in the state she was not eligible for public relief, nor, as a foreigner, could she get "aid for dependent children." She would not want to be dependent upon an agency indefinitely. On the other hand, her husband earned only about six to eight dollars a week selling feathers, while she as an operator on boys' clothing made twelve to sixteen dollars a week. Perhaps she could earn as much as twenty dollars later. Then she could take somebody into the house to care for the children. As it was, she could barely make ends meet. The worker pointed out that if that were the case at present, she would not be able

to manage on a relief allowance, for it would be much less than she was earning at present.

At this point Mrs. Bowers began to tell again how much she wanted her children. She knew it would be hard to manage on a relief allowance but she must have them with her. The worker said it did not seem like a very sound plan for her merely to wait, taking some assistance from our agency until she would be eligible for public assistance. If she did think there was hope of getting a better job and of using a day nursery or getting a roomer who would help with the children, the agency would work with her on such arrangements.

Discussion with the foster home agency showed that the children had come into foster care in a most unkempt, neglected state, with sores all over their bodies from dirt alone. It was true that Mrs. Bowers was devoted to them in an "almost animal-like way" but she apparently could care for them only with much supervision. Moreover, Mr. Bowers himself had written to say that he did not want the children returned home because of his wife's inability to manage a household.

There were further interviews in which Mrs. Bowers persisted in her pleas to have the children back but could not move forward in any plans for providing adequate care. She was most angry at her husband for his attitude and complained about the fact that she had to help support him. When faced with the worker's refusal to provide further financial aid because there seemed to be no indication that the plan would work out any better than it had some months earlier, Mrs. Bowers went on to tell of her great unhappiness with her husband. He was of absolutely no value to her and she would have to leave him. Since she had maintained the home only for the children's sake, she now wanted a separation. She inquired about classes in citizenship and English and about how she could get a different job. When asked whether she would like to return and talk about such matters, she said no, things seemed pretty much settled now but she might come in again later.

Subsequent inquiries at the child placement agency and a chance contact with Mr. Bowers revealed that things were going very well with them. Mr. Bowers said he was glad his wife had been persuaded not to bring the children home. They had apparently effected a reconciliation (reported the children's agency worker) and, according to Mrs. Bowers, were having a "second honeymoon." The children had been placed in separate homes and were making excellent progress.

Another example of an application for both financial assistance and help with other problems is found in the following case. This applicant gave clearer indication in the first interview that she would

probably be able to use the agency's services to arrive at a satisfactory solution of her difficulties.

Case 10 [6]

This case first came to the agency's attention three years earlier, when Mrs. Lord's brother applied for the placement of his sister's child by a forced marriage. The husband had deserted immediately, and the girl's family (she was only nineteen years old) refused to let her bring the baby home. Through the agency's help the child had been placed in an institution.

Mrs. Lord herself came to the agency three years later, saying she wanted to make some new plan for her son. She looked at the worker searchingly, as though to determine how much she knew about the earlier situation, and when told that the worker remembered all about it, she said, "Well, then, I'll tell you just what's going on now." Hesitantly Mrs. Lord said she was not at all satisfied with the care the baby was receiving. She seemed anxious not to appear critical, kept saying one must not blame the institution, but kept emphasizing her feeling that a child who is reared under such conditions lacks the love and attention he would get from his mother. It was apparent from the way she talked that she had given the question a great deal of consideration. She was definitely opposed to placing the child in a foster home, saying that would be almost as bad.

In explanation of what would be involved in keeping the child with her and how she thought the agency could help in this respect, she told the following story. She said she could not consider taking the child to her parents' home, where she was now living, for the atmosphere there would be very bad for him. Her mother was ailing, the house was neglected, the neighborhood was very poor. Her wage of $14 a week would be sufficient for her and the child's support, but who could take care of him while she worked? Day nursery care would not be feasible, for her job required that she work on different shifts—one of which was from two in the afternoon till nine at night. She had thought and thought about plans, but all seemed to end in a stalemate. It was for suggestions that she had not thought of that she had come to the agency. The worker said that the agency would be glad to give her some help in trying to work her way out of this difficulty but she must not think they could think up some wonderful solution for her. If Mrs. Lord wanted this kind of help it might involve a good bit of change that might be hard for her to make. The worker then tried to explain the agency's usual method of work in situations like this—exploring possibilities with the client and helping him make the necessary arrangements after he had made his decision—

[6] *Ibid.*

and Mrs. Lord left the office saying, "Of course, if I work out some plan in three or four weeks I'll be doing well. But I want to tell you that if I ever get Bill home I'll *never* let them get him back!"

Another category of problems that applicants bring to family agencies are those that have to do with securing assistance from other organizations. Problems of mental and physical illness can be listed under this heading, as well as those of unemployment. Then there are difficulties of a legal nature; the question of securing insurance adjustment occurs frequently; and requests are often made for help in procuring public assistance or some other sort of governmental aid. Again, parents may want to know how to secure day nursery care for their children, or they may want to talk over the question of putting a child in a foster home, of taking him to court because of his misdemeanors, or of securing some sort of special help because of his physical or mental handicaps. People often come to family welfare agencies with problems like these because they do not know how to go about finding the appropriate organizations, or it may be that they do not know that specialized agencies exist or that the community provides any special solution for difficulties that they can express in only very general terms.

Most of the rest of the problems for which applicants seek help—or for which help is offered in the course of a family agency's work with them—can be summed up under the heading of family relationships. Problems of this nature have always come to the attention of these agencies, but the psychological orientation of modern case work has given them a position of special importance in recent years, and it is on the agencies' services in this area that the claim to be of value to clients irrespective of economic status is largely based.

In the past the problems of this nature that typically came to the attention of family agencies were those of drunkenness, desertion, and nonsupport, nor are such problems absent from the case records of today. Sociologically considered, such problems represent the failure of the individual to fulfill his domestic duties, to play his expected role in family life. In forms less subject to legal action other problems of family relationships occur frequently. They are seen in the complaints of husbands that their wives do not rear the children properly and in the complaints of wives that their husbands neglect them or spoil or mistreat the children. They appear in the actions of adolescents who run away from home, who do not contribute what the parents con-

sider their appropriate share to the family support, who otherwise act in ways that are out of keeping with the customs of the group to which the parents belong.

In perhaps the majority of cases these problems are stated to case workers in terms of somebody else's fault: a wife wants to know what to do about her husband's behavior; a husband what to do about the actions of his wife or children. Sometimes the applicant to the family agency includes himself in the problem situation, describing a state of general disharmony, in the production of which he has a share. At times it is his own actions and feelings that concern him, as when a man fears that he will have to run away from the domestic situation, or a woman is worried because she does not have what she considers the proper attitude toward her husband or children. Questions of divorce or remarriage, responsibility for relatives, keeping or giving up illegitimate children, sanctioning disapproved behavior, adopting children, placing children in foster homes, committing family members to mental hospitals or other institutions, questions of wives working and of unemployed or disabled husbands performing a wife's usual domestic tasks—these and many others are the kinds of questions that come up for discussion frequently in the course of an agency's work in the area of family relationships. No single example is adequate to illustrate this category of cases, but some indication of the kind of problems involved, as well as an agency's method of giving help with them, is given by Case 12, below.

Services and Underlying Principles of Family Case Work

The problems with which most applicants come to family welfare agencies can be summed up as those of getting a living, managing a household and providing for the physical care of its members, rearing children, carrying out responsibilities to relatives, and achieving harmonious relationships in family life. All of these, it will be noted, are problems that must be solved if a family is to fulfill its functions as a social institution, and all of them are probably rendered more difficult by economic stress. Contributions to the solution of difficulties arising in these areas of family life are made by various social institutions, as has been shown in Chapter V, where it was also pointed out that social work's peculiar contribution lies in the fact that each case is considered in its uniqueness and that help is given in individual terms. Since this is so, it is rather artificial to categorize the

kinds of help that family welfare workers are prepared to render. Briefly, however, they may be summed up as financial assistance, advice about other organizations and their services and help in securing contact with them, support and counsel in making decisions and plans about how to deal with family problems, and facilitation of practical arrangements in carrying them out.

Since these kinds of help are more or less implied in the problems themselves as described above, greater interest attaches to the general methods by which these kinds of help are given. The methods are not peculiar to family case work, but are common to the total practice of social case work. Nevertheless, in their concrete expression they do attain an individual character by reason of the nature of the problems to which they are applied. It has been shown in Chapter VIII that for years case work was concerned with rehabilitating families, and that the methods used were those of studying very closely their situations and capacities and the factors which brought them to their present condition and then drawing up plans by which the families might be restored to self-dependency. Elaborate techniques were developed for eliciting and evaluating information, for mobilizing resources outside the agency's command, for co-ordinating the work of various organizations, and for keeping the clients on the high road to what was regarded as their social salvation.

Eventually, however, family case workers and others observed that there was something wrong with their seemingly logical plans for helping people out of trouble. There were many clients who did not seem to want this kind of assistance, and there were others, apparently willing, who did not carry out the plans that were so carefully prepared. It was possible for a time to dispose of those people by the labels "unworthy" or "un-co-operative," but as social work became imbued with the scientific, professional spirit it became necessary to consider more closely what lay behind the refusal of many upright clients to take advantage of the proffered aid. Dynamic psychology and sociology provided clues, which were also contained in less refined form in the man-on-the-street's criticism of social agencies. The explanation was found in the discovery that few people can be helped to play their part in group life (in their families, in work, in using medical or educational resources, and so on) by plans that are made for them by others, no matter how wise those others may be. Guided by knowledge of sociology and psychology, a social worker may through patient listening and observation come to understand

some of the reasons why a client behaves as he does, may have some sense of what he is trying to work out for himself, and some ability to strengthen his positive desires. But the social worker cannot make another person's plans for him with any assurance that he will carry them out or that the results, if he does, will be those that the social worker had foreseen. What the social worker can do with value to the client, modern case work theory holds, is to let the client see clearly what kind of help the agency has to offer; to help him decide, without condemning him for his doubts and fears, whether he wants to use that help, how he can use it, and what is implied for him in using it; and then to work with him on the plans that are based on those decisions. As a person who knows the community and its resources and has a professional status in it, the social worker can often secure assistance for a client that the client might not be able to secure for himself; and he may be able to bring about changes in those aspects of his client's situation that are causing difficulty. But all of this, modern case work holds, is seldom really helpful to a client unless it grows out of the client's own planning.

The principle that control over his activities and responsibility for them must be left to the client if case work is to be constructive in a large proportion of cases is not difficult to understand if one imagines oneself in the position of an applicant to a social agency. You come to the agency with a definite request—say, as a young married woman—for help in setting up a household apart from your husband's parents. Your mother-in-law has been taking charge of the children while you and your husband work, and there has been increasing tenseness in the family relationships because of the conflict of ideas about how to bring up children. You have puzzled for months about what to do, for your income is too small to permit renting an adequate apartment, but finally a friend told you that the family agency might help you to pay the rent. To ask for such help is very difficult, however. It means admitting that your husband can't support you and the children in the expected manner. In addition you dislike revealing the family quarrels and, as it were, complaining about your husband's parents' conduct when, as a matter of fact, there is so much you should be grateful for. Then, too, there is no telling what the social worker will make you do once you put yourself in her hands. But finally things become so bad that you think you must go to the agency, come what may.

It is with apprehension, distrust, and yet hope, therefore, that

you approach the social worker to whom the person at the application desk sends you. Now contrast your probable feelings if this social worker uses one or the other of the following two approaches to your problem. Suppose she listens to your story (she must do that in either case) and asks many detailed questions about the health of all the family, where the children go to school, where you and your husband work and the names of your employers; who is your present landlord, where your parents-in-law were born, how old they are, and so on. Then she says she will interview all these people and look around for a cheap apartment for you; perhaps she will find a day nursery for the children; she will try to induce your husband's employer to raise his pay; and so on. In other words she takes your problem out of your hands and you have only, she assures you, to wait and all may be well.

On the other hand, she may, after hearing the story, ask you to tell her more about your plans for the separate apartment. Have you found one you would like? How much would it cost? How do you plan to care for the children while you are at work? What will the children think about leaving their grandparents? How does your husband feel about this new arrangement? What are some of the other possibilities you and he have thought of? She suggests that you talk this question over with him; that you figure out a budget so that the three of you together may see how much a separate apartment with the attendant extra food, light, laundry bills, and so on will cost; that if you and your husband decide you do want to move, you inquire into the apartment situation in the neighborhood you want to live in; and so on. The agency may be able to give you some financial assistance with your plans, but first we must get it quite clear just what the plans are to be.

It seems obvious that the latter approach to the problem is the one more likely to stimulate resourcefulness, to mobilize the applicant's power to do something for himself, to cut through the circle of fear, antagonism, and guilt, and to bring the applicant out into the clear light of reality. Not every person will be able to use this kind of help, of course, but the alternative method offers little except a shelter to those who like the feeling of dependency.

Closely associated with the principle of leaving with the client the responsibility for solving his problem is that which stresses the dignity and worth of each human being, his right to come to the agency with his difficulties and to inquire about its services, his right to know the

reasons for the agency's procedures and to be informed about all the steps it takes once he has become a client, his right to withdraw when he wishes to, with assurance that he can return and that his confidences will have been respected.

These and other principles are involved in the question which has occupied the attention of case workers in recent years: that of the emotional factors involved in giving and accepting help of either a material or a psychological nature. It has become increasingly clear that for most people on either side of the social worker's desk this is a far from simple matter. Canon Barnett and his co-workers sensed some of the difficulties when they said that it is degrading to the applicant to seek help from "strangers" and that the giver is put in an impossible position if he has to sit as judge, determining whether applicants are worthy of being given aid. Other difficulties have come to light as social workers have become increasingly aware of their own feelings about the matter and of the feelings of their clients. It is seen that both cultural and more personal factors are involved, and that to give even the most elementary and concrete forms of assistance in a manner genuinely helpful to most clients requires much knowledge and skill.

In the course of applying these principles to case work situations two further principles have recently been developed that serve as safeguards against clients and workers being overwhelmed by the immensity of the relationship into which they might otherwise have entered. One holds that the social worker acts as a representative of an agency which has been set up by people in the community to carry out certain purposes, and not as an independent practitioner with a professional responsibility for guiding people's lives. Just what the agency has to offer by way of help and what the conditions are on which that offer is made are set by agency policy, so that the individual worker is protected from having to "play God" with his client's life. The client, too, under this plan, is saved from the humiliation of having to appeal to the sympathy of a stranger for help. He comes to the agency because it appears to him to offer the kind of assistance which he needs, and he discusses with the social worker, as a representative of that agency, the question of whether his conception of the offer of help is correct and what is involved in his accepting it. In actual practice, of course, the process is not as objective and clear cut as that. Most clients come to an agency in confusion, doubt, and fear. But underlying their coming is a decision to do something about

their difficulties, and it is the task of the case worker to help them to find whether what they want to do lies within the agency's area of assistance. In this way modern social work has overcome the difficulty of deciding about the worthiness of people for help. That decision is no longer put upon the social worker. He must still make judgments, it is true, but the judgments are no longer concerned with the worthiness of the client but with the feasibility of his plan from the point of view of the agency's resources and the likelihood of the client's being able to carry it through.

The second safeguard is closely related to this one. It is found in the principle that each kind of social agency operates within a limited field and does not offer or attempt to achieve total personal or social reconstruction. An agency's services center around particular types of difficulties, a fact that is implied in our earlier conclusion about the function of social work. In the course of helping a client work out his solution to the problems which lie within the agency's field, many others may be revealed, but it is a principle of modern case work that these other problems should be followed only in so far as they have bearing upon the matters at hand, and that if they are outside that area the client should be referred to another agency, where he can consider anew what he wants to do about them.

This principle at first sounds arbitrary and self-defeating, but consideration will show that by this means both client and case worker are held to the task at hand and are not tempted to avoid that issue by pursuing questions far removed from it. By this device also the client is kept in control of his situation. He cannot drift comfortably along, opening up one aspect of his life after another to his "friend," who may later be regarded as knowing too much or as having exerted too much authority, but he must decide with each new major issue whether he wants help badly enough to seek the services of a new person in order to get it. The principle works equally in the social agency's favor. Its workers are confined to the problems that the agency was set up to meet and therefore do not spread their activities over the whole field of social work to the confusion of administrative arrangements and interagency relationships.

To state the principles in this categorical manner is probably to do them an injustice and certainly does not serve to make their application in actual cases clear. This latter end could be achieved only by lengthy description and example, but a few illustrative cases will be cited below. If, however, the principles can be accepted as stated,

they will be found to have considerable bearing on much of the subsequent analysis of the work of social agencies. One point, however, must be made clear in this connection. Social work—like other professions—does not have one, unified body of theory that is followed by all practitioners. There are "schools" within the profession, and divergences of opinion among their leaders. In actual practice many social agencies do not follow even the principles which they teach. In these respects social work does not differ from other professions, but it is important to remember that the principles and point of view set forth in this book are not necessarily those that would be accepted by all social workers.

Some Illustrations of the Work of Family Agencies

As has been pointed out several times, the problems that lead people to seek the help of social agencies do not exist in isolation, and social work's peculiar contribution to their solution lies in its method of individualization; that is, in its way of taking into account the complex of factors in each case and working out with clients plans that are in keeping with their customary modes of behavior. Its aim is not to prescribe solutions for difficulties but to help clients—through material aid, knowledge of resources, and psychological backing—to mobilize their own capacities for dealing with them. Accordingly, the above listings of the kinds of problems that bring people to family welfare agencies and of the kinds of help the agencies afford may give a misleading conception of family case work, since they represent an analysis of common elements in many cases rather than a portrayal of work in any one. It is only through seeing social work in action in concrete cases that an adequate understanding of the work of an agency can be secured. Therefore, although it is not the aim of this book to analyze the specific methods of social work or to familiarize its readers with the technical devices by means of which it is carried on, the following examples of part of the actual processes of work in two cases are presented.

The first example gives in considerable detail the first few interviews and the social worker's impressions in a case that started when an extremely worried young wife of a recently hired WPA worker requested money to make a partial payment of rent so that they would not be evicted. It will be noted that the case worker accepted this request as a reasonable one, one that the applicant had a perfect

right to make, thus relieving the applicant of part of her terror and shame at having to ask for what she doubtless thought of as charity. The case worker's main interest, however, was not in meeting the immediate emergency (which might well arise again if nothing more than this were done about it) but in sizing up the couple's capacities for self-responsibility and in finding out whether the agency could help them remove the impediments to the normal economic functioning of their family life.

Case 11 [7]

Mrs. M, an attractive young woman, rushed into my office breathless. She was dressed in a shabby fur coat and looked as if at one time she had spent a great deal of money on clothes. She made numerous apologies for not being able to talk. Each time I began to say something she interrupted. The tears began to stream down her cheeks. After about ten minutes of this I was able to break in.

When I said that it might be that her inability to talk to me today would prevent me from knowing how we could help or whether she wanted to use our help, she seemed to pull herself together and then told me that she must have money for rent, as she was afraid they would be locked out. She could not bear that; it would be the last straw. . . . She then went on to tell me she was six months' pregnant. She was fortunate in having been able to make arrangements for free care at a maternity hospital. The real problem was how they were going to manage in the next two weeks; her husband would then receive his first WPA check. When I asked how they had been able to manage until now, she went on in a more controlled, rather straightforward manner to tell me how they came to be in this situation.

Ever since their marriage eight years ago, her husband had made a good livelihood for her and their child. He worked as a salesman for several big companies, and they were able to maintain a nice home. However, seven months ago he lost his job. For a short time they had unemployment insurance, which was very inadequate. They had broken up their home, stored their furniture, and lived with relatives for a while and then, when that became unbearable, took their present furnished place. All that she would like from us now, she said again, was enough money to pay the landlord some rent so that they would not be put out. She seemed to be almost in a panic at the thought of losing their present home.

I said that she had made so many changes already that she must be pretty worried about having to make another one and added that under

[7] Herbert H. Aptekar, "Principles of Relief Giving in a Family Agency," *The Family*, XXI (October, 1940), 196–99.

certain conditions we did help with money for rent. She looked considerably relieved when I said this. When I went on to say, however, that I wondered how helpful it would really be for us to meet this emergency, since they would be faced again with the necessity to pay rent within the month, she said she was sure that once her husband began getting his WPA checks regularly they could get along. Almost immediately, however, she began to wonder whether that would really be so. I said that the way we sometimes helped was with money the family might be able to use in order to make things different for themselves. She talked a great deal about her husband's adequacy and how they hated taking public relief. I indicated that it seemed to me that she did not want to remain on public relief and perhaps she could see some purpose to which she could really put our money. She was thoughtful about this and then suddenly burst out with the statement that if there was some way she and her husband could get off relief they would be the happiest people in the world.

She then told me about several prospects which he had recently for employment but because he had no money could not take them on. One was a job at $30 a week plus commissions but he could not take this because he needed a car. . . . If he could possibly get help with something like this it would be wonderful. I said that since it would be her husband who would be working on such a job we would want to see him. She became very excited about this and said that she just couldn't get home fast enough to talk with her husband about it. She said this gave her a ray of hope. Of course they still had their immediate problem of meeting the rent but she knew now that was not the most important thing.

In connection with the immediate problem I said that if she had some proof of her eligibility for it, we could help them with one month's rental. . . . She said she would try to get back that afternoon with a letter from the landlord. She came about two hours later with a letter stating his willingness to accept $20 for the current rental and to wait until the rest of it could be paid at some later date. When I said that now that she had carried out her part in the agreement we were ready to carry out ours, she looked almost radiant. She said she just hadn't realized when she came here this morning that she would be able to do so much running around to get this together. She was beginning to feel like a different person.

A family agency's typical use of relief funds is shown in this episode. In contrast to public assistance agencies, whose funds are provided by law for the relief of financial distress, most family agencies have the policy of using money to preserve or strengthen family life.

They reserve most of their limited financial resources for families who are capable of self-maintenance and who need financial help to save them from disintegrating discouragement or incapacitating worry.

In addition, the case record shows the effect on the client of being made responsible for securing the proof of her eligibility for the agency's financial assistance (the letter from the landlord) and for formulating a plan for the future. The case worker, on hearing about the distressing situation, did not take the whole matter into his own hands, saying he would investigate and let the applicant know the answer. Instead he left to her the part she would reasonably be expected to play had this been a typical commercial transaction, and in doing so he not only stimulated her to mobilize her temporarily paralyzed capacities but also secured some information for himself about her ability and initiative.

In the next interview, which was held with the husband, another aspect of modern case work is revealed. The respect for the client's dignity and for his right to make his own decisions is again shown, as is the attempt to mobilize his energy and resources for taking his part in the plan. In addition, this interview illustrates how a case worker—out of training, previous experience, and ability to understand how other people are likely to feel about situations—tries to sense a client's attitudes and, by his acceptance of them as natural to the situation, creates a situation in which the client is free to express what he is really thinking. To put his thoughts into words and to discover that they are not abhorrent to another person often of itself helps to relieve the client's tension and anxiety. In addition, such an expression of feeling and opinion clarifies for the social worker the nature of the situation with which he is dealing and provides a firmer basis for the decisions that he must make about helping a family.

The next day Mr. M came to the office. I immediately got the impression that here was a strong, capable, intelligent person. . . . His approach to his situation and to the experience here was realistic. Although it was obvious that his was a difficult experience, since he was in a taking rather than a giving position, he nevertheless handled it in a well-controlled way. I told him that since seeing his wife I had been wondering how fair we had been to him in arranging for the giving of money without taking him more into consideration. He was obviously surprised at this and said that after all they needed the money and it came at an opportune time. I said I had no question about their need but I did wonder how he felt about not participating in getting it. From this he

went on to tell me that he really had considerable question about coming here, much as he wanted to have the opportunity to be self-maintaining and get off relief. He had some impressions about the way relief agencies make it difficult and embarrassing for people. He had wondered a bit about this when his wife came home with the money for rent. He really did feel that he ought to play more of a part in what was going on.

Mr. M went on to say that he had always made a good living for the family but that for months now he had had a feeling that things were out of his control. He got quite discouraged, especially since his wife was pregnant. When I commented that sometimes a person in such a situation feels like throwing the whole thing over, he agreed that he had felt that way a number of times. However, he loved his wife and child and for that reason had put those thoughts out of his mind when they occurred. It hadn't been always easy to get rid of those thoughts. He said he knew that many people meet their situations by running away from them. Although that was a temptation and it was a hard struggle to go on living, he had the feeling that there was something to live for. There was genuine thoughtfulness and sincerity in his discussion.

Mr. M said that, although he had really been pretty doubtful when his wife told him that we helped families if they had some real purpose to which they could put our help, he thought that the least he could do was to take a chance and come here to see if it were really so. He would like to tell me what he had done and what he thought he could do in the future if he could get help. [He then described various plans. For one job he needed a car. Another prospect was taxi driving but that required $5.00 for a hack license, and though he had tried for the last six months his friends and relatives could not lend him even that much money.] I said that we sometimes helped with money for this type of thing but I did wonder how definite it was that he could get a taxi job. At first he was very positive . . . but then apparently there was some doubt in his mind. He said that since his wife had told him that we must have some definite evidence of a job he had written the company which had offered him the $30 job, asking if it were still open for him. . . . He said he would also write to his friend to make sure that the job at the taxi company was also available.

I commented that he was already working on two problems he had created for himself. We both laughed about this. He then said that this morning he really hadn't been able to think of a thing for himself and his family, everything looked so hopeless. I said that it might be in thinking over these proposals he might discard them as not being what he wanted. On the other hand, if he did want to continue with one of them we could perhaps help him. Mr. M left in a lively frame of mind, saying

that as soon as he had the letters he would communicate with me for an appointment.

The next case example, instead of being confined to a few interviews, shows in less detail the main developments in a total case. In this case the giving of financial assistance played a minor role, for the client's chief problem was that of deciding whether or not to have her husband committed to a hospital for mental disorders. The family had previously made use of the family agency's services, so that the case worker already knew something about the situation when Mrs. Ely came to the office with her present request.

Case 12 [8]

Mrs. Ely came to the Family Welfare Association asking if a job could be found for her husband. It was known to the worker that Mr. Ely had general paresis, which had resulted in considerable mental deterioration and epileptic attacks. Mrs. Ely had refused to commit him to a mental hospital although it had been recommended by psychiatrists on several occasions.

During the interview Mrs. Ely was distraught and tearful. She was tired of working and having the whole responsibility. Sometimes she felt that she could not go on, as there was no reason why Mr. Ely was not working. He was perfectly capable of taking a job. In the next breath she would tell how harrowing it was for the children to see him in a seizure. The seizures were becoming more frequent. She didn't know which way to turn. Sometimes she thought it would be better to follow the Highland Clinic's advice and have him committed, but she could not do this because of the effect on the children. On the other hand, she didn't know what would happen to them if he stayed at home; the effect of his being there was already showing in the children, especially in Marjorie, who was under care for asthma. She thought that if the child were away from her father she would soon be well. Sometimes she blamed Mr. Ely, and sometimes she felt what was the use of blaming anyone for what could not be undone.

The case worker told Mrs. Ely that from what was learned from the clinic Mr. Ely was not capable of taking a job and consequently the agency would not be able to help her with this request. She could see, however, that Mrs. Ely was extremely troubled, and she knew that deciding what one wanted to do and what was best to do in any situation was often

[8] An abbreviation of a case record of a client of the Family Welfare Association, Baltimore, Md.

one of the hardest things a person had to accomplish. Sometimes it took a long time to work through to a decision. One of the ways in which the agency might be of service to her would be in helping her to decide what she could do in regard to her husband. Mrs. Ely expressed interest, and plans for further appointments were made.

In the interviews which followed, Mrs. Ely told more and more of the hardships she and the children were enduring. Marjorie's asthmatic attacks were increasing, and Sheldon was unable to concentrate in school. He was a bright boy and had been doing so well but now everything was wrong. Mr. Ely's deterioration was increasing. Recently he had taken to stealing bread and milk from the corner store. She thought that for him to behave like that was a disgrace to the children, but she kept repeating that if it were not for the children she would send him away. Her relatives told her to do it but she couldn't. The relatives had never been friendly since her marriage; they had always said Mr. Ely was no good, and she should not have married him. She spoke with bitterness of how Mr. Ely had brought all this on himself, and she had to bear the brunt of it. There were times when she felt sorry for him, and again she did not.

In one of the interviews Mrs. Ely spoke of the strain she was under in working, but she had to work because that was the only way in which they would have food. When the case worker suggested the possibility of getting financial assistance from the Department of Public Welfare if Mrs. Ely would give up her job and stay home, she said she was not interested, saying it would be worse to be at home with her husband than working. Later on, when Mrs. Ely's work in the tailoring shop became irregular, the case worker arranged to supplement her earnings for two months, by which time she expected that full-time work would again be available.

Gradually through these interviews Mrs. Ely was helped to express her real feelings about her situation and to come to a realization that there was some justification for them. She then became sufficiently free to act. A month or so after her first interview she said she had thought it all through carefully, had decided that things could not go on as they were, and that putting Mr. Ely in the hospital was the best plan. She was told that was something the Highland Clinic could help her with. Mrs. Ely then brought up the problem of the house, which was owned in the name of herself and her husband and wondered how she alone could transact a deal about it. She was told the Legal Aid Bureau could probably give her the necessary advice. She went to both the clinic and the bureau and made the necessary arrangements.

In her next interview Mrs. Ely expressed considerable concern because she was told at the clinic that if she did not go through with her plans they would never help her again. Under the family worker's reassurance

that she could always go ahead with hospitalization, she immediately said she had made her decision and was going through with it. Then she talked about how she used to feel about the matter, how she now felt toward Mr. Ely (sorry for him and not resentful), how she and the children would miss him, how pleased she was to have the house situation settled, and so on, ending with saying that the case worker would never know what it meant to her to be able to talk things over like this. When she kept thinking by herself, she got so worried she was afraid she would lose her mind, but when she talked to the worker she felt so much better and thought she knew her own mind.

In the next interview, Mrs. Ely described how very hard it was to take her husband to the hospital. They went in a police car and he sat silent, huddled in a corner all the way. At the hospital she was not allowed to see him after they took him away, and it was several days before she got a letter from him. Altogether it was the worst experience she had ever had. After the case worker said she had some appreciation of how she must have felt, she said she was really glad it was all over. While she was worried about how he would feel toward her, now she must admit she was relieved to have him out of the house. She and the children already had more peace of mind and were less tense, and she knew that in the end it would be better for him also. The neighbors and relatives had already found out about his commitment; she didn't know how. Some blamed her, and some said she had done the right thing. For herself, however, she did what she felt was the best.

Then Mrs. Ely went on to describe her household arrangements—about how the children were cared for while she was at work, what her current bills were, her present wages and her hoped-for increase. The case worker told her the agency would continue the weekly contribution of funds previously agreed upon.

At the time of the next interview two weeks later Mrs. Ely had much to tell about an unexpected visit she had been able to pay her husband in the hospital. The whole experience was most pleasant. She found Mr. Ely in a large, pleasant recreation room instead of in a solitary cell as she had feared, and he and the other patients seemed happy and had much to interest them. Mr. Ely looked very well, did not mention coming home, and did not blame her for having sent him to the hospital. She thought he had deteriorated somewhat and that his memory was poor. He had an attack while she was present, and she was pleased to see how gently the attendant handled him. He was as delighted as a child with the new clothing she had brought him. She said she was convinced that the hospital was the best place for him. If she had known what it would be like she would have sent him long ago, but she could only think of it as a place of punishment for him. She was silent a few seconds and then

remarked, "Of course, that was on account of my own feelings, as everyone told me it would be best there for him." The case worker asked whether she thought she understood her own feelings better now, and she replied she knew she did, and she also knew why she used to feel the way she did.

Mrs. Ely then went on to tell how much better things were at home now that Mr. Ely had left. She felt so much freer and did not feel as though she should hide from people. The children were better too. Marjorie's asthmatic attacks were infrequent and milder, and Sheldon seemed less fearful. She herself had made arrangements about working longer hours and found a good plan for the children's supervision. But household work itself was harder with Mr. Ely away. She was tired when she came home at night; the house was a mess; laundry was a great problem. The case worker asked whether she would prefer to stay home a while and give up her work, but she said no, she preferred to be independent, since the children were getting older and did not need her so much. She was averaging about $13.50 a week now and was sure the Department of Welfare would not give her nearly so much. There was a bit more discussion about some small bills which were due and about Christmas plans.

Mrs. Ely then said that since she was working full time it was hard for her to come for appointments. Besides she did not feel so worried now and thought it not necessary to come in any longer. The case worker agreed that she seemed to feel able to handle things alone, and added that she must know that any time she wanted the agency's help she could return. Mrs. Ely replied that she knew what kind of questions to bring to the agency. She felt that she could discuss anything with the case worker and she would understand. If she got worried again she would come in immediately.

As in the previous case we see that the case worker accepted the client's request as a reasonable one to make of the agency, even though it had to be immediately refused. It was made clear, however, that in denying the request the agency representative was not denying the problem. Nor did the case worker propose—as others had done—the obvious practical solution for the problem, for the client made it clear that the problem consisted not only of her husband's mental disturbance and the bad effect it was having on the children and family life but also of her own attitude toward her husband and the cause of his illness and toward mental disease and mental hospitals in general.

The work on the case centered around that problem, and the other aspects of the family's life that might have seemed unsatisfactory

to an outsider (one child's ill-health, another's school difficulties, the mother's working, and the difficulties with household management and supervision of the children which that entailed) came in for consideration only sufficiently to let the mother see that the case worker was willing to help her with these problems if she so desired. In other words, the case worker, having secured entree to the case, did not use her position to attempt to remodel the family's life but confined her attention to that part with which the client felt herself unable to deal without assistance. It is an interesting commentary on this policy of case work that when the client had been helped to work out her problem in this limited area, she was apparently able to deal with the other problems more effectively and to her own satisfaction.

A final example of the work of a family agency is given in the following brief extract from a group work record. Few family agencies use group work methods in carrying on their work, for the character of the difficulties that most clients bring to these agencies usually requires a highly individualized kind of help, both because so many aspects of the family's life are involved (income, job, health, children's education, living quarters, relations of the various family members with each other) and because a resolution of the difficulties often requires material as well as psychological assistance. A few attempts have been made, however, to use group work methods with clients who want help with certain kinds of problems of family life, such as those of child rearing or of marital relationships. The possibility of helping them other than individually was suggested by some parent education organizations that conducted discussion groups with the aims of social work rather than those of education in view.[9] This point of view aroused some interest among family case workers and one organization, the Cincinnati Associated Charities, has reported on

[9] The distinction here drawn is between education as a process of imparting knowledge and developing skills that are generally applicable, and social work as a process of helping individuals to find their own peculiar ways of meeting difficulties in social relationships that are uniquely their own. Group work of the latter type in regard to family difficulties was first developed by leaders in the field of parent education and only later experimented with by a few family welfare agencies. This suggests that the line between education and social work may be rather fine; but, functionally considered, this kind of parent education would seem to be social work, regardless of the auspices under which it is carried on.

For a fuller description of the theory and methods employed in this work see Meta L. Douglas, "Can Study Groups Lead Parents to a Better Emotional Adjustment?" *Mental Hygiene,* XVIII (1934), 604–10.

its experimentation with the use of such group work methods.[10] The following brief illustration of what may happen in such a group and what may be accomplished is from that agency's files.

Case 13 [11]

In the course of the discussions carried on in the X group a fairly young mother, Mrs. White, told of her complete inability to bring up her only child, a baby about one year old, and talked of her fears of having other children because of her harrowing experience with this child. She felt absolutely unable to train him or have him do as she wanted; the child completely ruled her. Having the child had completely disrupted her scheme of living and was causing serious conflict between her and her husband.

The group pounced on her eagerly and laughed at her fears and her helplessness. One mother of nine children commented that by the time she had reared five or six she would know what to do, that things would come natural for her. The others were amused at her frankly admitting that she was helpless but were active in making suggestions. They pointed out that from her own story they would not consider the child bad and that it looked as though she wanted to make him so. The leader recorded that she was somewhat concerned for fear that the group had been too frank in their expression of opinion and too intolerant of Mrs. White's immaturity, and that her anxiety might be increased by the many conflicting suggestions. The leader, apparently, took no active part in protecting Mrs. White at this time, but it was largely her skilled leadership which had produced the situation in which the group members were free to say what they thought and to accept suggestions without taking offense.

Later developments suggested that the experience had been a beneficial one to Mrs. White. She told her case worker very soon afterwards about how she had been laughed at and what suggestions had been made. She then went on to tell of her desire to have more children and of her present ways of handling the baby—not in terms of what he made her do but of what she could do for him—and described the part her own feelings had played in the child's behavior. She said the group members had told her that she had made the child bad, that from the incidents she related the child was not bad at all. The case worker was inclined to think—on the basis of additional knowledge about the woman—that the fact that the leader and the group members accepted Mrs. White's attitude toward her child in a friendly, unresentful manner she was able to feel less

[10] Helen Alcott Shuford, "Group Counselling as a Supplement to Individual Consultation in a Family Agency," *Smith College Studies in Social Work*, VI (1936), 211–67.

[11] Adapted from a case described in Shuford, *op. cit.*, pp. 216–17.

anxious about him and able to handle him in a less emotional, more rational way.

This record is too brief to show what really transpired in this situation or to give substantial evidence of the relative parts that the leader and the group members played in this mother's solution of her problem. It does suggest, however, that there is a real possibility of aiding individuals with their family problems through the use of social group work as well as social case work methods.

Suggestions for Further Study

Aptekar, Herbert, "Principles of Relief Giving in a Family Agency," *The Family,* XXI (1940), 194–201.

Breckinridge, Sophonisba, *Family Welfare Work in a Metropolitan Community: Selected Case Records,* University of Chicago Press, Chicago, 1924.

Case records illustrative of the wide variety of problems with which family welfare agencies dealt in the 1920's and earlier, and of the methods used at that time.

Defining Family Case Work Services in Relation to Client Applications, Family Welfare Association of America, 130 E. 22d St., New York, 1938.

A collection of papers dealing with various aspects of family case work. A particularly clear statement of theory and description of practice with respect to relief giving by a family agency is contained in the article written by Helaine Todd.

Dixon, Elizabeth, and Grace Browning, *Social Case Records: Family Welfare,* University of Chicago Press, Chicago, 1938.

Case records illustrative of family welfare work as commonly practiced in the mid-1930's.

Hollis, Florence, *Social Case Work in Practice,* Family Welfare Association of America, New York, 1939.

Six annotated case studies showing in detail how "case work treatment" is carried on. The book is addressed to professional workers and much of the analysis presupposes considerable understanding of case work theory. Chapters I and VIII, however, may be valuable to the general reader, since they set forth in considerable detail many of the principles upon which case work is currently based.

Marcus, Grace, "Changes in the Theory of Relief Giving," *Proceedings of the National Conference of Social Work,* 1941, pp. 267–79.

Marcus, Grace, "Social Case Work and Mental Health," *The Family,* XIX (1938), 99–105.

An analysis, by a leading case worker, of the implications of dynamic psychiatry for social case work.

Towle, Charlotte, "The Social Worker and Treatment of Marital Discord Problems," *Social Service Review,* XIV (1940), 211–23.

Chapter XII

SOCIAL WORK IN THE FIELD OF CHILD WELFARE: HISTORY AND GENERAL PRINCIPLES

Paralleling family welfare, child welfare is customarily considered one of the main fields of social work. Under that heading are classified activities associated with providing foster care for children, both in private homes and in institutions, with improving the conditions under which children live in their own homes, and with assisting children to avoid delinquency, utilize health facilities, participate in organized recreational groups, and otherwise make use of the social institutions that have the function of meeting children's basic needs. Although these are, in the main, the activities which engage social workers in this area, closer consideration will show that to classify family welfare and child welfare work as co-ordinate branches of social work leads to some confusion of thought and raises questions in regard to the inclusion or exclusion of certain activities in the social work field (such as whether visiting nurses and school attendance officers are engaged in social work) which would not otherwise arise.

In earlier chapters we traced the evolution of family welfare work as a social work concept and showed that present practice justifies the conclusion that social work activities in this field have as their function the facilitation of family life rather than the promotion of the general welfare of individual members. By this we do not mean to imply that family social workers would sacrifice the welfare of some members of a family for that of the total group—whatever such a concept might mean. Rather we mean that their services are occasioned by the presence of conditions that interfere with the normal functioning of a family as a social group that is set up to perform certain tasks, and that these services are offered with a view to helping one or more family members to find a way of dealing with the adverse conditions.

This conclusion is reiterated here because it points up the contrast

between family welfare and child welfare as concepts, and indicates why the two are not co-ordinate branches of social work in general. Social work's concern, we have shown, is with the relationships between individuals and social institutions. In work aimed at helping people with the problems they encounter in playing their role in family life the social work function is clearly carried out, but in child welfare work the institution through which the welfare of children is to be secured must be designated before the place of social work in the activities becomes clear. In short, a family is a social institution, a child is not; and social work is concerned with the welfare of individuals in relation to institutions and not with welfare in general. Accordingly, our analysis of social work in the field of child welfare will follow institutional lines, and we shall consider what services social agencies afford to children in families, schools, courts, recreational and relief organizations, and other social institutions.

The Scope of Child Welfare Activities

The term "child welfare," like "social welfare" and "public welfare," usually has a somewhat narrower connotation than a literal definition of the words would imply. From the sociological point of view the welfare of children is secured through their relationships with other human beings, largely through the medium of social institutions. The chief institutions which have among their functions that of meeting children's basic needs are the family, educational, recreational and legal institutions, those affording spiritual guidance, and those that provide medical and other therapeutic services.

Institutions of these sorts are taken for granted and, in their regularly constituted form, tend to be regarded as somewhat outside the scope of child welfare activities, as narrowly defined. Those activities are concerned chiefly with extending the services of certain of these basic institutions, with filling in the gaps in their coverage, with insuring that children shall not be deprived of their services or shall be protected in their rights within them. Such activities in their organized form provide a secondary line of institutions devoted to children's welfare, which supplement the long-established ones or facilitate their adequate functioning.

To give some examples of the activities and institutions which are customarily regarded as being strictly in the field of child welfare,

the following may be cited. The oldest are those that provide for the maintenance and care of children who are homeless or whose relatives cannot or will not support them, and that protect children against neglect, abuse, or improper rearing. Closely associated are day nurseries, visiting housekeeper services, and the like. Then there are various forms of care provided for specially handicapped groups of children—the feeble-minded and those suffering from certain neurological disorders; those who are deaf, dumb, or blind; those who are crippled or afflicted with certain particularly handicapping diseases; and those who are psychologically maladjusted. In addition, there are clinics that serve "well babies" and their mothers, and there are other health services that aim at prevention through early diagnosis and education. In the area of education there are nursery schools for "underprivileged" children, "training schools" for delinquents, and organized activities in the field of parent education. In recreation there are numerous sorts of programs designed to supplement those that are available to children who are economically well situated. Then there are activities directed toward the protection of children in the field of labor and industry and toward their guidance and rehabilitation if they have come into conflict with the law.

It will be noted that most of these activities are occasioned by the fact that large sections of the population cannot afford the services that are available to those who can pay for them. Accordingly, child welfare programs are associated in the public mind with poverty, either in the individual families that use the services or in the communities as a whole in which the programs operate. To a large extent this association is justified; but it will be seen that, sociologically considered, most of these programs are not really different in nature from those (such as fee-charging institutions for the mentally handicapped, and medical and recreational services) through which the needs of financially secure children are met. In addition, some child welfare services—such as mental hygiene clinics, maternal and child health programs, and some recreational services—are available to children without respect to economic status. In considering the place of social work in the field of child welfare, therefore, there seems to be no reason for distinguishing between newer and older forms of service or those that serve the poor or the well to do. Rather, the objective is to discover how social work operates to facilitate children's utilization of the various social institutions that are maintained in their behalf.

Economic Facts Necessitating Child Welfare Programs

The question of the relation between poverty and the need for subsidized child welfare services cannot, however, be so summarily dismissed.[1] As will be shown later, the role of social work in the field of child welfare—as in poor relief and family welfare—is complicated by the economic question. Accordingly, it seems worth while to review briefly some of the economic facts which necessitated the provision of child welfare services in addition to those customarily supplied through schools, hospitals, and other long-established sources.

Basic in such a survey is the size of the incomes of American families.[2] Recent surveys and censuses have revealed that, in whatever way they are viewed, the incomes of very large proportions of the population must be considered inadequate. It has been shown, for instance, that from a half to two thirds of the children in American cities live in families whose income is under $1,200 a year.[3] In 1935 3 per cent of wage earners' families (which constitute forty per cent of the total) had an income of less than $250 a year and more than half of them were in the $500 to $1,500 level. Only 3 per cent received $3,000 or more. The condition of farm families was even worse. Of those who received no aid from public sources, half had incomes of under $1,000 a year, including in that figure the value of the products they raised and consumed at home.

By and large, the condition of families on relief was even less favorable, and there were from six to eight million children (out of a total of thirty-six million) in such families in 1939. "It is common knowledge," reports the 1940 White House Conference, "that the assistance given to many families is not enough to permit a good home for the children." That statement is substantiated by the fact that the average amount of general relief per case in December, 1939, ranged from $3.00 to about $36.00, that in some sections of the country no relief other than "surplus commodities" was available to unemployable

[1] For a simple but vivid description of how money enables a family to carry out its duties, see Henry W. Thurston, *The Dependent Child,* Columbia University Press, New York, 1930, pp. xiii–xvi.

[2] The following statistics refer to the period in which this book was written, and obviously change with the years. For an understanding of the current economic background of much child welfare work, students are advised to bring these statistics as up to date as possible and, perhaps more important, to compile comparable statistics for the communities in which they are particularly interested.

[3] *Consumer Incomes in the United States,* National Resources Committee, Washington, D. C., 1938, p. 46.

people,[4] and that payments under the aid-to-dependent-children provisions of the Social Security Act averaged monthly in 1938 $31.73 per family or $12.88 per child.

Since it is estimated that $900 a year is usually required to support a family of four on an "emergency" level and $1,200 on a "maintenance" level,[5] the truth of the statement that "16,000,000 families, 74 per cent of all non-farm families in the United States, did not have sufficient income even in the so-called prosperous year 1929 to provide an adequate diet at moderate cost for their children." [6]

The provision of adequate shelter, schooling, medical care, and recreation through family resources is greatly handicapped by this economic situation. With respect to the first, a few statistics from the numerous housing studies which have been made in recent years are convincing. It has been shown that 3,000,000 farm families live in houses that do not meet even the minimum standards of health and comfort; that 85 per cent of all farmhouses have no bathrooms, 93 per cent no indoor toilets, and 15 per cent no toilet facilities of any kind.[7] In cities the situation is different but just as bad. A survey of urban dwellings outside New York City revealed that a sixth of them were in need of major repairs or were unfit for habitation.[8]

Elementary and secondary schooling are provided without charge and are therefore often regarded as uninfluenced by family income. Nevertheless, there is wide variation in the quality of the schools provided, which depends to a large extent upon the average income of the families in a community. In addition there are many areas in the country where families cannot afford to send their children to school even though no tuition is charged. In 1937 over a million children of elementary school age were not attending school, and "school opportunities for hundreds of thousands of migrant and rural families and of Negroes were often deplorably or entirely lacking." [9]

In spite of many free clinics in urban areas, families with low incomes are definitely handicapped in providing adequate medical care

[4] *Ibid.*, p. 22 and footnotes, pp. 22–23.

[5] William Hodson, "The Economic Basis of Child Welfare," *Annals of the American Academy of Political and Social Science,* CCXII (November, 1940), 59–60.

[6] W. R. Ogg, *Proceedings of the White House Conference on Children in a* Democracy, U. S. Department of Labor, Children's Bureau Publication No. 266 (January, 1940), p. 18.

[7] *Ibid.*, p. 19.

[8] *Ibid.*, p. 26.

[9] *Ibid.*, p. 33.

for their children, and they are also more likely to contract disease. It has been shown that acute illness is 47 per cent more prevalent and chronic illness 87 per cent more prevalent among families on relief than among those that have an income of over $3,000 a year, and the situation in nonrelief families of low income is almost as bad. Medical care for such families is woefully inadequate. Thirty per cent of relief families are said to receive no treatment by physicians in serious, disabling illnesses.[10]

These statistics give but a slight suggestion of the gravity of the situation but they serve to show that much of child welfare work is necessitated by economic inadequacies. Responsibility for improvement rests upon the total public acting through both governmental and private channels. How radical an economic reconstruction is necessary is a matter of opinion, but it is clear that either the present system of so-called free enterprise must be altered so as to provide families with incomes with which they can pay for adequate shelter, food, clothing, and medical care, or these goods must be provided to millions of families through other means if the physical welfare of children is to be assured.

The situation is not a new one, of course, and measures looking to its improvement are continually being undertaken. Some of these represent the private initiative of organized industry, which sees that it is to its own advantage to have physically fit workmen. Some stem from organized labor. That the government is taking an increasingly large part in regulating economic institutions is testified to by such laws as those dealing with soil conservation, improvement in marketing facilities, securities exchange control, minimum wages, labor conditions, social insurance, agricultural subsidies, and taxation schemes. In addition, the provision of facilities offsetting the economic handicaps of families is on the increase, as witness the recent expansion of subsidized housing, public health services, recreational facilities, and the public relief and social insurance programs.

These examples of the means and methods currently being used to create more equitable economic conditions and to improve social institutions are listed to indicate the wide scope of the child welfare problem and to emphasize that social work is but a part of a much wider program. This is not said to play down the importance

[10] William Hodson, *op. cit.*, p. 61. Cited from the Report of the Technical Committee on Medical Care, *Consumer Incomes in the United States,* National Resources Committee, Washington, D. C., 1938.

of social work but to put it in its proper perspective, for social work is sometimes regarded as the chief means through which the problems of poverty and of child welfare are dealt with. In contradiction to that belief, this brief review of the situation indicates that child welfare, even in its economic aspects, involves a large part of organized society and requires work in many diverse fields for its improvement.

The Role of Social Work in Child Welfare Activities

Social work's role in the promotion of child welfare activities is the one it customarily plays: that of helping individuals deal with the difficulties they encounter in relation to the other social institutions. The institutions that are of prime importance for children's welfare are the family and the organizations that fulfill some of its functions when it is lacking or unable to perform all its duties (foster families, child-caring institutions, relief organizations, and other devices that will be described below), schools, recreational facilities, health services, and those legal institutions through which delinquents are investigated and supervised. Social work is carried on in connection with all of these types of institutions, its services being available both to those who administer the institutions (if so formal a term may be used to include parents and foster parents) and to the children whose interests the institutions serve.[11]

Since each of these institutions is organized very differently from the others and has very different functions to perform, it follows that the social work carried on in connection with each of them has characteristics that are peculiarly its own. An analysis of social work activities in the field of child welfare must accordingly consider each of these institutions separately.

The chief of the institutions through which children's needs are met is the family, and the majority of social work activities in the field of child welfare are concerned directly with families or with the social institutions (foster care facilities and relief organizations) that substitute for or implement the family's services. Close analysis of these

[11] This way of viewing the matter may appear to be unduly formal. It is true that in social work parlance it is sometimes only these social work aspects that are included in the term "child welfare work," or the term may even be limited to case work activities carried on in connection with the care of children in their own and foster homes. It seems to us, however, that such a use of the term is too limiting, since it overlooks the major share which other professions play in the field; and that it is also confusing, for it may lead to the inclusion in social work of many activities that are outside its scope.

activities will reveal problems that have much in common with those described in the chapters about public relief and family welfare work. Specifically, the question is this: Just what is the function of social work in programs designed to promote child welfare by giving financial assistance to families, in those that provide for the care of children who are homeless or whose relatives cannot support and supervise them adequately, in those through which help is offered to families in dealing with difficulties that arise in connection with child rearing and training?

There has been a tendency among social workers to group all these programs under the general heading of child welfare work and to assume that whether the chief services needed are relief, foster care, child protection, or counseling with parents in regard to problems of child rearing, the main objective is to see that the children in question are assured of the most favorable conditions possible. Such a conception, it will be seen, has much in common with that which attempted to make family welfare work and public assistance fairly equivalent services because in each the aim was held to be that of rehabilitating families. We have analyzed in the preceding chapters how social workers have arrived at a different conception of their functions in these two fields. Our task now is to trace out the development of social work in connection with the family and economic aspects of child welfare activities in order to understand current thinking and policy in that area also.

After our detailed analysis of the development of social work in the field of public relief and family welfare it is probably unnecessary to present arguments to justify the assertion that the provision of funds and facilities for the care of children, either in or out of their own homes, is not in and of itself social work. The provision of care for destitute and neglected children became in England a recognized responsibility of the state when the breakup of the feudal system and the impoverishment of the church through Henry VIII's measures removed the two chief earlier sources of their maintenance. Under the famous Elizabethan poor law statutes, the poor were divided into three categories: widows and orphans, the able-bodied, and the infirm —categories that today form the basis of our public assistance systems. For the care of children who were homeless, whose parents were destitute, or who were grossly mistreated or neglected, various provisions were made by this statute and subsequent ones. To supplement the tax-supported programs numerous sorts of private philanthropies

developed or were continued—some under religious auspices, some supported by fraternal orders or foundations, and others financed by wealthy individuals or by private subscriptions. These facilities paralleled those provided for destitute persons in general, though they took some special forms because of children's peculiar needs. What we would point out is that a complicated body of social institutions, designed to meet the minimum needs of children who lacked families or whose families could not support them, was in existence long before social work came into being.

In order to see clearly the place of social work in these family aspects of child welfare work it is necessary to recount briefly the development of the various types of programs, for, as with poor relief in general, it will be found that social work methods were devised to meet some of the difficulties that were commonly encountered. Again it is impossible to draw up a simple outline of developments, for various forms of assistance to children developed concurrently and persisted in spite of widely recognized disadvantages. As with our description of poor relief programs, however, it may be sufficient to point out the main features of the chief plans and the ways in which they failed to meet children's needs, for social work in this field as in others was originally a response to difficulties otherwise encountered.

The programs for offsetting the economic and social disadvantages which children suffer in their own homes are necessarily limited to three main types: those that provide assistance to families, those that secure other families with whom the children may live, and those that provide congregate care for the children. The first was the plan originally used by religious and private philanthropists in the days of indiscriminate almsgiving, only those children being otherwise befriended who were homeless or grossly neglected—and even many of them, in the years in which feudalism was breaking up (and much later, under crowded metropolitan conditions), became vagrants, dependent on what they could pick up by begging. Again, today, after many changes in policy and underlying philosophy, it is a plan that is preferred when circumstances are favorable, but the other means of aiding children are also held to have their place in well-rounded child welfare programs. Now, as earlier, there is an intermingling of all three plans; hence it is only for analytic purposes that they can justifiably be separately considered.

It should also be noted, in introduction, that these devices, which were originally designed to protect children from the effects of destitu-

tion, came later to be extended both to children whose parents were not necessarily poor but who were lacking in knowledge, desire, or ability to care for them or who wanted help in their endeavors, and to children who themselves did not respond well to family life. In other words, there runs throughout the family aspects of child welfare work today a double motif of economic and social psychological problems, and it is that which both necessitates social work efforts and creates confusion in regard to their purposes.

The Development of Programs for Providing for Children's Maintenance

Outdoor relief; "farming out"

As has earlier been shown, even during the years in which the trend in poor law policy was against outdoor relief—that is, relief to persons in their own homes—widows with young children were more generously dealt with than other pauper classes. This was particularly true of those whom the poor law administrators regarded as worthy and deserving, those whose poverty they did not consider attributable to individual fault. There was doubtless always present some conviction that children do best in their own homes, provided they are good homes; nor was the danger of encouraging idleness and dependency believed to be so great when only young children and their mothers were to be aided by poor law grants.

Nevertheless, for years it was common practice for poor relief officials to "farm out" destitute children or sell the services of them and their mothers to those who would make the lowest bids for their care. Against these practices much of the work of private philanthropy was a protest, and, as has earlier been shown, many organizations were established to give financial or other material assistance to deserving widows and dependent children. Many children, however, could not be cared for by such means, for some were homeless and others were abused or neglected; consequently other facilities had to be provided for meeting their needs.

Indenture

A method widely used for many years and still legal in some states was that of indenturing.[12] This was a carry-over to the care of

[12] For a detailed account see Grace Abbott, *The Child and the State,* University of Chicago Press, Chicago, 1938, I. 169–255.

dependent children of a legal arrangement, worked out during feudal times, by which parents apprenticed children to master workmen. The masters were legally bound to give the children shelter, food, clothing, and instruction in a trade, while the children were required to live with them, be obedient and industrious, and render them the products of their labor until majority. Since the masters received payment in the form of the children's services, the arrangement was beneficial to them only if the children were old enough to work. When applied to the care of younger pauper children,[13] indenturing had grave disadvantages (quite aside from its normal hazards), for it encouraged masters to set children to work at as early an age as possible and to work them as hard as possible, for they had to receive from the children's labor enough to recompense them not only for current expenses but for those incurred when the children were too young to work. In addition, most of these pauper children had no parents to whom they could turn if their living and working conditions were too oppressive.[14] Nevertheless, indenturing had in its favor the fact that each dependent child was some individual's responsibility, he had some sort of private home, and he was saved from vagrancy, which was so prevalent at the time that indenturing was adopted as a means of caring for destitute children.

Care in almshouses

The evils of farming out and indenturing as ways of providing for the care of young children became increasingly apparent under urban conditions. It was therefore considered a forward step when the county poorhouse system was introduced. For instance, an inquiry into the condition of paupers in New York State, conducted in 1825 under the direction of J. V. N. Yates, the Secretary of State, came to the conclusion that "the poor, when farmed out or sold, are frequently treated with barbarity and neglect by their keepers" and that "the education and morals of children of paupers (except in almshouses)

[13] Children were indentured even in infancy. See Henry W. Thurston, *The Dependent Child,* Columbia University Press, New York, 1930, pp. 15–16, for a contract concerning a two-year-old child (whose parents were living) drawn up in Massachusetts in 1747. For the woes that the indentured children themselves sometimes suffered, see a letter from one of them, in 1844, *ibid.,* p. 18. This whole book is recommended to those who want to know more about how dependent children were cared for before 1920. See also Grace Abbott, *op. cit.*

[14] For contemporary accounts of bad conditions under the indenturing system, see Henry W. Thurston, *op. cit.,* pp. 163–66.

are almost wholly neglected. They grow up in filth, idleness, ignorance and disease, and many become early candidates for the prison or the grave." [15]

Poorhouses were no innovation in the early years of the nineteenth century; in fact, they had been a common means of poor law care for considerably more than a hundred years in both England and the United States. What was new about the Yates plan was that every county in New York State was required to maintain a poorhouse, and that the overseers of the poor had the right to commit "any child under the age of fifteen, who shall be permitted to beg or solicit charity from door to door, or in any street or highway" to it, "there to be kept and employed and instructed in such useful labor as he or she shall be able to perform." [16] Indenturing was not done away with; rather it was postponed until after the child's discharge from the poorhouse at an age at which he could be expected to make a worthwhile apprentice.

We mention this New York experiment because such enlightening, contemporary evidence is at hand for showing its lack of effectiveness as a means of providing for the care of dependent children. A committee of the New York Senate in 1857 reported their findings regarding the condition of children in almshouses as follows:

> The most important point in the whole subject confided to the committee is that which concerns the care and education of the children of paupers. There are at least 1300 of these now inmates of the various poorhouses, exclusive of those in New York and Kings Counties. . . . The committee do not hesitate to record their deliberate opinion that the great mass of the poorhouses which they have inspected are the most disgraceful memorials of the public charity. Common domestic animals are usually more humanely provided for than the paupers in some of these institutions; where the misfortune of poverty is visited with greater deprivations of comfortable food, lodging, clothing, warmth, and ventilation than constitute the usual penalty of crime. The evidence taken by the committee exhibits such a filth, nakedness, licentiousness, general bad morals, and a disregard of religion and the common religious observations, as well as of

[15] *Annual Report of the State Board of Charities of New York* (1900), in which is reprinted the *Yates Report of 1824*, pp. 951–52.

[16] Quoted by Henry W. Thurston, *op. cit.*, p. 25, from *Charity Legislation in New York, 1609–1900*, in Vol. III of *The Annual Report of the State Board of Charities of New York* (1903).

gross neglect of the most ordinary comforts and decencies of life, as if published in detail would disgrace the state and shock humanity.[17]

A more explicit description of conditions in one particular almshouse is given almost twenty years later by a member of the State Board of Charities:

On the date of October 28, 1874, there were in this poorhouse fifteen children. . . . Six of the number were under two years of age. . . . These children were found in different parts of the poorhouse establishment, as is usually the case. Four of them were in a ward with women paupers. Among these was a girl eight or nine years old. One of these women . . . had a very irritable temper—so violent that she could not retain for any length of time a home outside of the poorhouse. She was strong and healthy, and a woman of very debased character.

A second group of children—boys—were found in the workhouse. . . . Here was an insane woman raving and uttering gibberings, a half crazy man was sardonically grinning, and an overgrown idiotic boy of malicious disposition was teasing, I might say torturing, one of the little boys. There were several other adults of low types of humanity.

The third group were in a back building called the insane department. They were the most promising children of all, and yet the place was made intolerable by the groanings and sighings of one of the poor, insane creatures, who was swaying backward and forward. . . . The children are not sent to school, neither is a school maintained on the premises, the number being too small to warrant hiring a teacher. . . . The property of the county had the appearance of being well cared for, and the house was cleanly and in order; but in this as others less aggravated, no separation of the children from the older inmates is practicable.[18]

Child-caring institutions

It was conditions such as these that led to the demand for new ways of dealing with dependents and neglected children.[19] Among these were separate institutions for children, orphan asylums or "chil-

[17] New York Senate Document No. 8, 1857, Sophonisba Breckinridge, *Public Welfare Administration in the United States, Select Documents,* University of Chicago Press, Chicago, 1938, p. 154.

[18] Quoted by Henry W. Thurston, *op. cit.,* pp. 32–33, from *Annual Report of the State Board of Charities of New York* (1875), pp. 233–34.

[19] In spite of the development of other methods, care of children in almshouses continued for many years. As late as 1923, for instance, the U. S. Census reported the presence of 1,896 children in such institutions.—*Paupers in Almshouses, 1923,* U. S. Census Bureau, Table VII, p. 10.

dren's homes" as they were frequently called. The first state to set up separate institutions for children was Ohio, which established county children's homes in 1866. Other states followed suit within a few decades. It was largely under private auspices, however, that children's homes developed. Seven such institutions had been founded in the United States before 1800,[20] and their numbers increased rapidly during the next century. Some were limited to orphans, some to illegitimate children, some to children of a particular race or creed, but some not only took any child recommended to them but went out in search of children in the slums of the city. Probably all of them represented a protest against almshouses (and even jails[21]) as a means for caring for destitute children, as well as against the general social conditions under which the children of the very poor in large cities lived.

As evidence of this latter situation, as well as of the prevailing philosophy and attitudes of the benefactors, the following extract from the 1859 report of the Northern Home for Friendless Children, Philadelphia, is enlightening.

Let the friends and patrons of the Northern Home for Friendless Children accompany us in imagination to some of the localities familiar to our Managers, who go out into the lanes and alleys, the courts within courts, seeking for these children who, in their ignorance and destitution, but for this seeking, would not be found at all. Look at that *Street.* Whatever you have read of the "Seven Dives of London," of the "Wynds" of Glasgow, of the subterranean dens of Liverpool, of the "Five Points" of New York, will also find its counterpart in a good degree in various localities here in Philadelphia—the same filth, the same poverty, the same dilapidation, the same pestilential atmosphere.

Look at that *Grocery:* that fatal row of barrels on the shelf, and of decanters on the counter; see spread out in that window in disgusting profusion the broken food that has been collected from door to door and sold or exchanged by various beggars . . . for *Rum.*

Go up that *Court:* see how it swarms with population, like a leaf with vermin; ragged, unwashed, uncombed, uncared for either in mind or body, gambling, blaspheming, fighting, crying, and feeding on garbage.

Enter that *Room:* the only furniture a stove and a bottle and in one corner a bundle of straw or rags; no bedstead, no table, not even a chair

[20] Henry W. Thurston, *op. cit.,* p. 40. See pp. 39–91 for contemporary accounts of the practices and problems of orphan asylums in early years.

[21] In New York City, for instance, destitute Negro children, at least, were often kept in jail. *Ibid.,* p. 60.

or a stool; the accumulation of dirt upon the floor so thick and of such long standing that whether it is wood or brick you cannot tell.

Go down into that *Cellar:* water oozing through the crevices of the floor; walls thick with mildew; vice is there, poverty is there, disease is there in all its horror; there is a drunken father, a drunken and abandoned mother; there is the thief, the gambler, and perchance a murderer; and there too are little *children. Is* that, *can* that be, a proper place for them? . . . Are the influences of that corrupt and degraded street the only influences that are to be thrown around them? Is their pilgrimage to be the same melancholy pilgrimage of so many hundreds of thousands before them? Must they too find their way to the grocery, and then to all the various haunts of *vice* and then to *prison,* and then to the *almshouse* and at last receive a pauper's burial in *Potter's Field?*

Somebody must consider these questions. *Somebody* must answer them. Society cannot do it in the aggregate. It must of course be answered by the individuals who compose Society, and thence the originators of the Northern Home and other Homes for Friendless Children.[22]

This impassioned account may not be very accurate as a sociological study,[23] but it does portray that combination of gross social pathology and self-righteous, self-assured humanitarianism that lay behind so many of the charitable effects of the nineteenth century. With such attitudes on the part of the benefactors it is not surprising that the children who came into their care were not only often ruthlessly removed from their families but were severely regimented and disciplined, and that little attention was paid to their individual differences in need for affection and guidance. There was much in the prevailing theories of child rearing in general to justify such practices, but their bad effects on children increased as the asylums grew large, until the term "orphan asylum"[24] itself came to connote a bleak, repressive environment which most parents would try to avoid for their children at all costs.[25]

[22] *Ibid.,* pp. 61–62.

[23] It is a fact, however, that during the 1850's and later there were very many neglected and even vagrant children in the large eastern cities, in part because of large-scale immigration from Europe and generally poor economic conditions. The Chief of the New York Police reported that there were 10,000 vagrant children in that city in 1852. *Ibid.,* p. 97.

[24] This term was frequently a misnomer, for many institutions admitted children whose parents were living, as the above quotation suggests.

[25] For interesting accounts of life within these institutions, see Henry W. Thurston, *op. cit.,* pp. 69–85.

Free foster homes

Another method of providing for children other than in almshouses was that of securing free or work homes for them. Facilities through which these foster homes were procured and children placed in them were widely established during the nineteenth century. An early pioneer in this work was the American Female Guardian Society, which was set up in 1834 for the reform of "fallen" women, but the most famous was the New York Children's Aid Society, founded by Charles Loring Brace in 1853 and still a leader in child-placement activities.

Brace proposed to meet the problem of childhood destitution and vagrancy by various methods (conducting religious meetings, establishing industrial schools and workshops and lodging houses, finding jobs for children outside New York), but the part of his plan that attracted most attention and grew to largest proportions was that of placing children in permanent homes in the country, in which they would work in return for their keep.[26] The plan, obviously, was somewhat like indenturing, except that legal contracts were dispensed with; but much was made of its being a social service on the part of both the Society and the individual recipients of the children. The procedure used for years was to collect children who were deserted, homeless, or in a state of dire poverty and to send parties of them, under the care of an agent of the society, to middle-western towns. There they were distributed in an informal manner from some public center, such as a town hall or a church, to farmers or townsmen. The agent would give a brief account of each child, the applicants and the children would size each other up quickly, and arrangements would forthwith be made, the children going to their new homes that very day.

As time went by, the plan was modified in various ways, for it became clear that finding appropriate homes for children was a much less simple matter than had at first appeared. Agents of the Society were placed in the middle west, their duties being to select suitable towns to which the children could be sent, to set up local committees that would pass on the qualifications of applicants, and to maintain

[26] For descriptions of this work, criticism of it, and contemporary documents about it see *ibid.*, pp. 92–140; Edith Abbott, *Some American Pioneers in Social Welfare,* University of Chicago Press, Chicago, 1938, pp. 128 f.; Charles Loring Brace, *The Dangerous Classes of New York and Twenty Years' Work among Them,* New York, 1872.

a loose sort of supervision over the children, particularly those who did not "give satisfaction." There were later modifications also but, by and large, the main features of the plan were still in force as late as 1920. It was copied by other organizations in eastern cities, this "emigration work," as it was called, being for years an accepted method of dealing with homeless children and with those destitute ones whose parents could be persuaded to part with them.[27]

Criticism of the free foster home plan increased with the years. It was directed chiefly against the permanent separation of children from their parents, the inadequate means of selecting homes and of safeguarding the children's interests in them, and the monetary incentives that led many people to offer homes to children. The New York Children's Aid Society itself attempted to remedy some of these faults, and it and other organizations developed new schemes for foster home care. The most widespread plan was that of the state children's home and aid societies, sponsored by various Protestant churches. They originated in Illinois in 1883 and were in operation in thirty-six states by 1916.[28] The efforts of these societies were also directed toward finding free homes for destitute children, but they made greater use of local committees for the selection of homes and were able to give somewhat more (though still slight) supervision to children placed in them. Among the improvements effected in the system were those of maintaining institutions in which the children could be kept pending placement, of boarding some children in temporary homes, and

[27] Among the "Instructions to Visitors" (as the staff members of the New York Society were called) issued in 1864 is the following statement of policy: "Your first and especial object is to find in your District children who are deserted or homeless, or who are in such a state of poverty as to be improved by being taken to good homes in the country. In no case must efforts be made to induce children to leave the city without consulting their parents (if there be any) or their nearest relations. . . . To the parents of these poor children, representations should be made of the great advantages which a good western home offers over the poverty and ignorance, and temptation, to which they are exposed in the city. The strongest assurances can be given to them that the future welfare of the children will be watched over by the Society. They, themselves, can hear from them if they desire and in no case is their child indentured."—New York Children's Aid Society, *Eleventh Annual Report* (1864), p. 43.

As late as 1919 the Annual Report of the society stated: "The crowning work of Children's Aid Society is in rescuing orphan and deserted children, as well as children of dissolute parents who are unfit guardians, and placing them in carefully selected homes in various parts of the country, where they will have the benefit of good family influence as well as proper schooling and training."—Cited by Henry W. Thurston, *op. cit.*, p. 134.

[28] *Ibid.*, p. 150.

of making some attempt to study the children's needs and the foster families' qualifications.[29]

Boarding homes

An important step toward making foster care serviceable to children (through giving the agencies more control over the conditions under which the children lived) was taken when organizations began to pay for their board instead of expecting the children to pay for it themselves through their labor. This plan was first undertaken (1868) on a fairly large scale by Massachusetts through the State Board of Charities. One of the Board's first acts after its establishment in 1863 was to take children out of almshouses and put them in a separate institution, from which they were indentured when they came to the proper age. An agent to supervise indenturing was early appointed by the Board—one who apparently took his duties to the children very seriously, for as early as 1866 we find him securing reports about the conditions under which the children lived and their behavior toward their masters, looking for suitable homes for indenturing, and proposing that personal visits should be paid to the children and that many of them had better be boarded than kept in an institution.[30]

Concurrently with the state's efforts in these directions the Boston Children's Aid Society developed more elaborate arrangements along somewhat the same line. That Society seems to have been the first to use foster care primarily as a means of helping children who were on the way to becoming delinquents. In its work there was a shift in focus from charity to correction, from fulfilling a social responsibility for providing homes for poverty-stricken children to attempting to help the individual children with their problems. Although one cannot say that it was in one particular organization at one particular time that social work in the field of foster care began, the work of the Boston Children's Aid Society in the latter part of the nineteenth century shows clearly its early course of development.[31]

Before describing that agency's work, however, we may summarize previous developments by pointing out that by the middle of the 1800's there had evolved a rather elaborate but unco-ordinated system of institutionalized arrangements for the care of children whose

[29] For an account of the development of the Children's Home Societies, see *ibid.*, pp. 140–60.

[30] *Ibid.*, pp. 161–70.

[31] See *ibid.*, pp. 170–98.

relatives did not provide adequate homes for them. When the inadequacy was purely financial and the relatives (especially if they were widowed or deserted mothers) were deemed worthy, assistance in money or in kind was sometimes available, either through public poor relief authorities or through private charities under various auspices. More frequently, however, the solution which these organizations offered for extreme poverty was the breakup of families, the indenturing of the older children, the placement of the younger ones in asylums, or the procuring for all of them of free homes in which they might grow up as members of a family. Temporary care in boarding homes was sometimes provided but was not a frequently used measure.

The breakup of families was particularly likely to be urged if the children were vagrants or if their home conditions were deemed deleterious to their welfare. As we have seen, agents of some of the privately financed organizations actually searched throughout the slum areas for children who appeared to be neglected, and tried to prevail upon their parents to part with them. The privately financed organizations (those under religious or fraternal or some other philanthropic auspices) were likely to prefer children who seemed to have good possibilities for being educated or trained, while to the public authorities (the poor law boards, the county commissioners, and so on) was left the care of those who were the least promising or who had the smallest claim on any particular charitable organization for their support. As with poor relief in general, to be "on the county" was generally regarded as the lowest level to which poverty could bring a family. If the poor relief authorities had only the almshouse to offer as shelter, that point of view was surely justified.

Relief to children in their own homes

These arrangements for the care of destitute and neglected children are, with greater or less modification, still in existence but they have been supplemented and overshadowed by the development of boarding home care and by the system of mothers' allowances or "pensions," that under the Social Security Act of 1935 was enlarged to become the aid-to-dependent-children program.

This latter provision for financial assistance to dependent children in their own homes has a long history. Its immediate basis is to be found in the conviction, which grew strong in the early 1900's, that homes should not be broken up for reasons of poverty alone,

a conviction that received official confirmation in the celebrated White House Conference of 1909, which was called by President Theodore Roosevelt to consider problems involved in the care of dependent children. Within a few years the "mothers' pension" movement got well under way and by the time the Social Security Act was passed such legislation was on the statute books of all states except Georgia, Alabama, and South Carolina. In most states these laws were permissive only, and the supplying of funds was dependent upon local interest, with the result that there were wide differences in coverage and amounts allotted, not only from state to state but from county to county within some states. Relief to dependent children in their own homes (including in that term the homes of relatives) was put upon a firm basis, however, by the aid-to-dependent-children provision of the Social Security Act, and much progress in this respect has since been made.

The present system

There are thus at present available for the assistance of children whose families cannot perform their economic or other social functions three main types of assistance: public and private relief programs of various types, child-caring institutions, and temporary or permanent foster homes, including adoptive homes. To this list may be added day nurseries, which were originally designed to give day care to children of working mothers, particularly those who were forced to support themselves because of their husbands' absence from home or inability to work.

The relative size of these various programs for meeting children's economic and family needs—including the work relief and general relief programs through which parents may be assisted—is indicated by the following figures. Those that refer to general and work relief programs vary extremely from time to time, depending on economic conditions and poor relief laws, but those that refer to dependent children are somewhat more constant, although they have doubtless decreased under the expansion of the aid-to-dependent-children program.

In the middle of the year 1940 there were 3,500,000 children in families of Work Projects Administration employees and 2,500,000 in those of families in receipt of general relief, while another 300,000 belonged to families receiving assistance through the Federal Farm Security Administration. Moreover, dependent children formed a

special category of those whose assistance was subsidized by the federal government, there being about 770,000 in the aid-to-dependent-children category by the end of 1939, and their numbers were rising. In child-caring institutions, public and private, were 140,352 children at the time the United States Census of institutions and foster homes was taken in 1933, while foster homes at that time cared for 102,577.[32] In these latter two groups was an unknown proportion of children whose parents paid for their support or who were placed away from home for reasons other than poverty alone. The number of children aided through private philanthropic organizations is unknown, but it is certainly a very small proportion of the total children cared for, since the expenditures for private relief in urban areas (and little was spent in rural ones) formed not more than 2 per cent of the total between 1935 and 1938.[33]

Through these various facilities, dependent and neglected children are provided with some of the most essential goods and services which the family as a social institution normally affords. As such they may be regarded as substitutes for the family or supplements to some of its services, but they are not—according to our earlier analysis of structure and function—social work. For social work has as its prime task helping individuals to use social institutions or to play their part in them (and, in that way, helping the institutions themselves to function better) but it does not duplicate other institutions or parallel their services. Accordingly, social work in child welfare began after facilities for the assistance of children were established, and from the outset it was at least partially concerned with helping children and their parents to make effective use of them. Such effective use could be secured only when an attempt was made to understand the problems of individual children and their families and to choose the

[32] In 1933—and probably now as well—there was great variation among states in the relative use of institutions and various types of foster homes. For instance, over 90 per cent of the children under foster care in North and South Carolina, Arkansas, Louisiana, and New Mexico were in institutions. Care in free family homes was the device most frequently used in Delaware, West Virginia, Mississippi, and Wyoming. Boarding homes were used most frequently in Massachusetts, Maine, Connecticut, Rhode Island, New Jersey, and Utah. Work or wage homes were infrequent everywhere but accounted for 8 per cent of the placements in Wyoming.—*Children under Institutional Care and in Foster Homes, 1933,* U. S. Bureau of Census, Washington, D. C., 1935, pp. 8–9.

[33] Ewan Clague and Anne Geddes, "Why We Need a Social Security Program," *Annals of the American Academy of Political and Social Science,* CCII (March, 1939), Chart II, p. 11.

facilities on the basis of their needs. Hence social work in this field, as elsewhere, necessitated individualization of services.

The Beginnings of Social Work in Child Welfare as Exemplified by the Boston Children's Aid Society

It is probably significant that the work of the agency that was among the first to develop the individualized approach which is one of the marks of social work should have centered around delinquent children, for it is doubtless easier to see these children's need for special attention. It might be thought that the difficulties under which homeless and neglected children labor would be removed if good homes (that is, the kind of homes which "decent" people customarily provide for their own children) could be secured for them or if they were gathered together in institutions; but delinquent children are already stamped as problems, and whether their delinquency is attributed to individual fault or to bad home conditions, it would probably be agreed that it would take special measures to reform them.

The founders of the Boston Children's Aid Society were disturbed by the fact that young children, ten to fifteen years old, were kept in solitary confinement in jail—some as a punishment for the offenses they had been found guilty of, others awaiting trial. The first work of the Society was to visit the children and to give them books and paper with which to occupy their time profitably, but it soon made arrangements to be appointed the legal guardian of some of the children and established an institution in which to keep them pending their indenture or their placing out in permanent homes.

So far the work was no different from that of other foster care agencies. It provided a general remedy (foster care) for a general condition (delinquency) and did it by increasing the already existing institutional facilities and by making homes available to children who were in need of them. It was soon discovered, however, that there were individual differences in the children who came under the agency's care, that few could be rehabilitated in short order, that work with their parents was also needed, and that special care had to be taken to find families that would give the needed "devotion, patience, and sympathy" to continue the work of reform that had been started during the children's stay in the institution the agency provided. All this necessitated close study of each boy's peculiar characteristics and

needs and some means of supervising the boys after they were placed in foster homes. These conclusions were arrived at within four years after the organization was founded—1863.

For instance, the agency's annual report for 1866 records:

> We soon found that we could accomplish nothing that would be of practical value unless we could retain the boys under our home influence for months, instead of weeks, as we at first imagined. Boys enter our Home who, from the neglect of parents or from the want of them, from early association with vice and crime in the streets of Boston, from the utter absence of anything like love, wear a hard, suspicious, and often a sullen appearance; but under the kind and gentle, yet firm treatment of those that feel for them, they become gentle and trustful, and all the higher and before-hidden qualities of their nature develop. . . . Let it be our aim, then, to see to it that our work is *well* done, and that every boy that leaves our asylum is, so far as we can effect it, permanently saved to society.

Again, the writer of the report says:

> Through what we do for the *children* we reach the parents, and influence them to think more of what is best for their children.

The next year this comment is made:

> There are many families where a good boy will have a good home, but a bad or trying boy will meet with little mercy, and this is rather the character of New England homes. There is needed to tame them (the difficult boys) a special devotion, patience, and sympathy, which are not universal or even common traits.[34]

By 1867 the agency was already receiving boys directly from their parents as well as taking them out of the charge of jailers and court officials. Soon similar work with girls was begun. Within a few years it was proposed that the methods used with these children be applied to destitute children as well and that boarding homes as well as free homes be sought, for the Society found it difficult to secure proper free homes for its charges who were too young to work. It was also early recommended that the agency employ visitors to keep in touch with the children, both while they were in the agency's care and even

[34] This quotation and the preceding ones are from the Society's annual reports of 1866 and 1867; quoted by Henry W. Thurston, *op. cit.*, pp. 172, 175.

later to "encourage their self-respect when they have become their own masters." Although these recommendations and descriptions of policy and practice do not state it in our terminology, it is clear that what these early workers were trying to do was not only to provide the equivalent of good home training for the children but to understand each child and his peculiar needs so that they could both find the most favorable environment for him and help him to adjust to society's requirements. Social case work, it would seem, was well under way in this agency long before the charity organization movement made it much talked about.[35]

The individualization of work with children proceeded apace after 1886, when the Society engaged a full-time "outdoor worker" (we would now call him a social worker), and many activities characteristic of present-day case work in child placement agencies were undertaken by him. The 1886 report of the Society contains this significant statement:

> Mr. Birtwell, in various ways, becomes acquainted with families in the poor and degraded parts of the city, *studies the character of the children, and the best way to help them—whether in their own homes, or by entire removal from their surroundings.* . . . In this work among the children's homes, Mr. Birtwell makes use of the existing agencies for the industrial, mental and moral benefit of these children. He places them in industrial schools, evening schools, sewing classes, etc., which otherwise, owing to the ignorance and neglect of their parents, would not be used. . . . Our most pressing need now is better facilities for placing in the country, at Pine Farm, the agency's institution, boys and city children who need to be temporarily removed from their homes. . . . While possible homes exist in every township in New England, there is great chance in their selection, and correspondence is not the same as personal acquaintance with those who are to form a boy's character at the most impressionable time of his life.[36]

This flexibility in approach to children's problems—the consideration of the needs of each child and the use of measures and resources believed to be appropriate to meeting them—is very different from the original practices of child-caring agencies, which consisted of pro-

[35] The first American charity organization society was founded in Buffalo in 1877 and a similar society was organized in Boston two years later. During the 1880's there was much discussion of case work in professional social work circles.

[36] *Twenty-second Annual Report* (1885–86), p. 8; cited in Henry W. Thurston, *op. cit.*, p. 179.

viding one or another means of subsistence for destitute children without special regard to their individual characteristics. The Boston Children's Aid Society also provided child-care facilities (in its institutions and through finding foster homes in which children could be boarded or placed permanently), but it added to them case work services, through which children and their parents were helped to make use of these and other facilities. The following account of the work as the "outdoor worker" himself saw it in 1887 makes the picture of his practices even more clear:

> Gradually the office has became a kind of bureau of information for matters relating to needy children. The reference of cases to other societies, especially to the various schools and Homes for destitute and orphan children, has required no little time and thought. . . . It has always been borne in mind that the sundering of family ties—the separation of a child from a father or mother, or the scattering of brothers or sisters—is a serious matter, requiring for its justification grave reasons and evident advantages. Wherever feasible, instead of sending children to "Homes," steps have been taken to place them in families. . . . Almost invariably the unfortunate father or mother, or often relatives outside the immediate family, when informed of a suitable boarding place at a low charge for board, have gladly made every effort to provide for the children in this natural, self-respecting way. When the meager earnings of the natural guardian have proved inadequate, they have sometimes been supplemented by help from charitable individuals.[37]

The emphasis on work with parents and the appreciation of what it may mean to them and the children when homes are broken up deepened with the years. In 1893 Birtwell wrote:

> These children cannot be divorced from the natural relations of family life without loss, any more than can those born under more favorable conditions, and therefore we must humbly set ourselves to learn the ways in which family ties may be strengthened and parental responsibilities maintained, while working at the same time for the reformation of the child.
>
> This method involves more thought and time than any other but is in itself worth more. It means that before we can decide on the best thing

[37] Birtwell proposed that the Society secure money for boarding children until they become self-supporting, for otherwise many would have to be left in destitution or "obliged to go to City or State Institutions, where hundreds of unfortunate children are gathered together."—*Twenty-third Annual Report* (1887), pp. 11–13; cited in Henry W. Thurston, *op. cit.*, pp. 183–84.

to be done, we must have personal relations with both child and guardian, and know the whole story of its life and surroundings.[38]

Two other aspects of case work in foster care for children were also given close consideration by the Children's Aid Society workers—these having to do with the selection of foster homes and with the supervision of children in them. We have seen that in the days before case work methods were used, almost all homes that were offered were accepted, subject at most to the approval of local committees or prominent citizens, and that the fitting of home to child was left almost wholly to the parties concerned. Supervision of the children was lax and confined largely to seeing that they "gave satisfaction" and were not too badly treated. In contrast, Birtwell in 1891 said:

Of course many things have to be taken into account in fitting the children to the families; and it is absolutely necessary that we keep in close touch with the families in order to carry out the purposes of thorough-going supervision. No wisdom, however, in fitting children to places, and no subsequent supervision, can make up for the evils of a slip-shod method of inquiry or a lack of real investigation, and careful selection of the families at the start. On the other hand the preliminary investigation and the unflinching rejection of all unsuitable and doubtful applications must be followed by wisdom in matching the children and the families, and that constant supervision, which good families welcome, and which with such families becomes genuine cooperation between them and us to secure the highest good of the children for whom they and we are together responsible.[39]

As early as 1887 Birtwell described his work as both preventive and reformative (concerned, that is, both with delinquents and with children who might become delinquent if nothing were done to help them), and he noted the need for research in order to discover which methods of assistance are most appropriate for given types of cases:

Just what cases are best met by one, just what by another, of the three methods of aiding the children—by personal work among them in their own homes, by placing them in families in the country, or by giving them special reformatory training in such Homes as Pine and Rock Lawn

[38] *Twenty-eighth and Twenty-ninth Annual Reports* (1893), p. 10; cited in Henry W. Thurston, *op. cit.*, p. 191.

[39] *Twenty-seventh Annual Report* (1891), p. 13; cited in Henry W. Thurston, *op. cit.*, pp. 190–91.

Farms—can hardly be known, or the adoption of the best plan in each case insured, until all three methods are adequately and simultaneously tested by one society, or if by more than one, by societies most intimately associated.[40]

There were present, accordingly, in the practice of the Boston Children's Aid Society by 1890, and even earlier, most of the elements of social work. Social case work was particularly well developed. "Community organization" was implied in the Society's use of the services of other agencies, in its work with them, and in its enlisting of community support for its activities. Research was asked for, and administration was, of course, required. Even the social action or social reform element was present, for in the Annual Report of the Society for 1890–91 it is stated: "The province of a Children's Aid Society . . . is to assist the community to see how far the percentage of poor and criminal may be beaten down, on the one hand by specific work for children and youth, and on the other by such reorganization of the life of the community as may remove the very causes of their degradation.[41]

Just how widespread these practices were in other comparable organizations at that time is not accurately known, but there is no doubt that in the child welfare as in the family welfare field social work was well under way before the turn of the century.

One must not be misled by these developments, however, into thinking that social work was (or is) carried on in connection with all child welfare activities, even with those having to do with family life—in other words, into thinking that all child welfare work is social work. Many agencies and child-caring institutions continue even now to carry on, without benefit of social work, their customary function of supplementing or substituting for the family's normal services to children. In addition, new devices for achieving these purposes (such as social insurance, day nurseries, and visiting housekeeper services) have developed with the years. Some organizations providing these new forms of service have added social workers to their staffs or have made use of social work principles in the general conduct of their services; others have not. Which course the administrators of the various agencies and programs follow depends largely upon what

[40] *Twenty-third Annual Report* (1887), p. 13; cited in Henry W. Thurston, *op. cit.*, p. 185.

[41] *Twenty-seventh Annual Report* (1891), p. 8; cited in Henry W. Thurston, *op. cit.*, p. 193.

they conceive to be the needs and capacities of the individuals they assist and their own need for knowledge about them.

Some Differentials in the Use of Social Work by Child-Caring Agencies

For an understanding of why social work services were developed and used by the Boston Children's Aid Society and other organizations of its kind and not by some other child-caring institutions and agencies one must consider the purpose of the Boston agency's work. The clue to why case work was found necessary by that agency is found in its original aim: it was not concerned primarily in providing shelter, maintenance, and vocational training to destitute children but in reforming delinquent children and in preventing the development of delinquency or other bad effects in those who suffered from inadequate family life. This aim, it became the agency's belief (though it was not expressed in these terms), could be accomplished through improving each child's relationships with the primary social institutions.

To that end the agency's representatives took children from courts and penal institutions and sought out in slum districts those who they thought were on their way to becoming delinquent or otherwise socially maladjusted. They worked with these children's families in order to prevail upon them to carry out their duties toward the children, and for the same purpose they put the families and the children in touch with the community's various resources, such as schools, Bible classes, relief organizations, and child-caring institutions. With the foster parents of the children whom they removed from home and placed, the objective of the work was similar. With the children themselves the chief objective was to help them to take advantage of what the families, foster parents, "asylum" authorities, schools, and so on, offered; that is, to play their proper part in society's institutional arrangements. In short, the agency's aim was to carry out the social work function.

This kind of help—in so far as its special character was recognized at all—was not generally believed by other organizations and authorities to be necessary for boys and girls who were taken into charge because they were destitute, homeless, or neglected. The interest of county welfare authorities in children, for instance, was (and still is) likely to extend no further than carrying out the duty imposed on them

by law to assure that nobody starves or is without shelter.[42] Since children have no political value to them and destitute children are an unpleasant burden on the taxpayers' funds, the usual objective of county authorities is to get them cared for as cheaply as possible. County officials are therefore usually willing to give the children over to any organized group that offers facilities for their care, provided the financial contribution required per child is kept low.

At the opposite extreme is the interest of religious groups in the children who come into their care because of family breakdown. This situation gives them an opportunity to put into effect all their convictions about the proper methods and ends of child rearing. Since their conception of the purpose of life is that of preparation for immortality, many such groups naturally prefer methods that give them the maximum of control over the children for whom they have accepted responsibility—a control that is secured more effectively in institutions than in foster homes. Accordingly, child-caring institutions dominated by religious objectives tend to keep the children in their charge away from contact with the outside world and provide within their own walls not only physical maintenance and religious instruction but schools and social and recreational opportunities as well.

Other types of organizations providing foster care may have other objectives, depending upon their beliefs about the causes of poverty and the means of its elimination. If they attribute poverty to individual fault and have convictions about its hereditary character, they are likely to expect little of the children of parents who so signally fail in their duties, and so they consider it hardly worth while to do much more for the children than to keep them alive and under the kind of strict supervision which they think will counteract as far as possible their unfortunate propensities. Such groups, too, tend to favor institutions as a means to these ends, but they have little objection to using foster homes if they are cheap enough and provide the children with "decent" care and tutelage. If, however, they are not too pessimistic about social heredity and believe that it can be overcome by persistent supervision, they, like the religious groups, prefer institutions to foster homes, for in them they can more carefully control the children's rearing.

[42] For a description of the attitudes of this group and others see Abigail F. Brownell, "The Value of the Foster Child to the Supporting Community as a Determinant in the Form of Care," *Journal of Social Work Process,* III (December, 1939), 213–37.

None of these groups, however, is likely to see much reason for the assistance of social workers, for they consider the children who do not take advantage of the opportunities afforded them either recalcitrant or spiritually lost or hereditarily incapacitated, and none of these conditions is believed to be alterable by the kind of help social workers have to offer. Social work, in other words, requires for its development and its use not only a particular objective on the part of an organization but a certain set of assumptions about the constructive capacities of human nature and the ways in which they can be stimulated.

The utilization of social work by child welfare agencies depends, therefore, both upon an agency's basic philosophy about the purpose of its work and upon its conception of the nature of its clients and other needs. The specific uses to which social work is put depend, on the other hand, upon the nature of the social institutions in connection with which its activities are carried on.

We have observed the working of that principle in the field of general poor relief. It will be recalled that social work developed in the latter field out of an attempt to rehabilitate the individuals who applied for assistance from charitable organizations, it being believed for many years that the need for such help was usually a sign of character weakness or, at least, of ignorance and lack of ability to plan and organize domestic matters effectively. Social work efforts were accordingly directed toward effecting the proper functioning of the family and economic relationships of paupers and toward mobilizing various community facilities in their behalf. This conception of the objective and methods of relieving poverty was, however, rejected by most poor law authorities and charitable organizations, with the result that family welfare work gradually became separated from poor relief, while most relief organizations continued their customary service of financial assistance without paying any further attention to their clients.

A few relief agencies, however, utilized certain of the social work principles and techniques that family welfare societies developed (chiefly those that had to do with investigation and the organization of community resources), while family welfare agencies continued to carry on a considerable amount of relief work that was not really different from that of other organizations. Clarification of the distinction between family welfare work and poor relief and of the services that social work has to render to each was not actually achieved until

very recently. Then, under the impact of a severe economic depression, the doctrine of individual fault as the main cause of poverty had to be finally discarded, and the right of individuals to adequate assistance under dignified conditions was recognized. In consequence, the basic tenets of both relief agencies and family welfare organizations underwent radical reorganization, and there emerged the conception of social work as a service directed toward helping individuals with the problems they met in specific institutional relationships. Social work came to be utilized by poor relief agencies as a means of making that institution's services beneficial to clients, while family welfare agencies took as their task the facilitation of family functioning.

In child welfare the differentials in the use of social work by various types of organizations have not been so clearly worked out. There are many child-care organizations that, like many public relief agencies and charities under private management, make no use of social work. Some of the reasons for that have been mentioned above. But within the group of organizations that do use the assistance of social work there is considerable dispute about what that assistance should consist of and what problems it should center around. The dispute is rendered obscure because the questions at issue are seldom explicitly stated. One question, however, would seem to be that which arose in regard to poor relief and family welfare: the question of whether individuals that secure assistance from relief agencies should be given assistance with other problems as well.

That question was for a time answered in the negative by the separation of family welfare from relief work, and its positive aspects have secured attention only in recent years. Other questions are associated with the fact that assistance may be given to children either in or out of their own homes and that it may be occasioned either by poverty or neglect, or by other family difficulties, or by a combination of these factors. To be more specific, a child may require aid because his parents or relatives do not have enough money to support him, because they are ill and cannot afford to pay somebody to care for him, because they do not want him or cannot manage him, because he has no parents and there are no relatives who are both able and willing to give him a home. These needs occasion the provision of various facilities for child care, each of which—according to our hypothesis in regard to the prime function of social work—requires somewhat different activities on the part of social workers because of their nature and purpose. It would seem, therefore, that the questions

regarding the role of social work in the field of child welfare can best be considered by discussing separately each of the main types of facilities (social institutions) through which the needs of children are met. That is the plan that is followed in the subsequent chapters.

Suggestions for Further Study

Abbott, Edith, *Some American Pioneers in Social Welfare,* University of Chicago Press, Chicago, 1938.

Documentary material; including, in an article about Charles Loring Brace, some interesting contemporary accounts of the early work of the New York Children's Aid Society.

Abbott, Grace, *The Child and the State,* Vol. II, University of Chicago Press, Chicago, 1938.

Documentary material; introduction reviews the history of the public care of dependent children in a particularly competent manner.

Kelso, Robert, *The Science of Public Welfare,* Henry Holt and Company, New York, 1928.

Chapters XXII–XXIV review the history of child-care methods in the United States.

Mangold, George B., *Problems of Child Welfare,* The Macmillan Company, New York, 3d ed., 1936.

An elementary textbook that deals with the various aspects of child welfare—health, recreation, education, labor, delinquency, dependency and neglect—in a rather conventional manner.

National Resources Committee, *Consumer Incomes in the United States: Their Distribution in 1935–36,* Government Printing Office, Washington, D. C., 1938.

Thurston, Henry W., *The Dependent Child,* Columbia University Press, New York, 1930.

An account of the development of means of caring for children. Combines an appreciation of the aims of the lawmakers with an analysis of the difficulties encountered and the conditions that developed. Considerable citation from documentary material. Shows, without explicitly stating so, how social work in the field of child welfare developed, and why. Somewhat sentimental in parts.

Chapter XIII

SOCIAL WORK IN THE FIELD OF CHILD WELFARE: ECONOMIC AND FAMILY ASPECTS

As has already been pointed out, the most important of children's needs are provided for through the family, so much so that when family facilities are lacking or parents and other relatives discharge their duties very inadequately, social custom always provides means for offsetting at least the most gross of the deficiencies. In modern American society numerous supplements to or substitutes for inadequate family life have been developed, some of them directed largely to its economic aspects, others concerned chiefly with its other functions. The types of assistance with which social work activities are most likely to be associated are the following:

1) Financial assistance to children in their own homes
2) Assistance to parents and children regarding other aspects of their home life
3) Foster care in day nurseries, child-caring institutions, and private homes

We shall consider each of these general forms of assistance separately in order to show how the social work function is discharged in connection with each of them.

Social Work in Financial Assistance Programs

The sources of financial assistance for families that cannot carry out their economic responsibilities toward their children have already been described, and it has been noted that children whose fathers are dead or out of the home have been traditionally considered a class requiring and deserving special attention. In earlier years family welfare societies and other private charitable organizations provided

financial or material aid over long periods of time to many cases of this type, but with the growth of "mothers' aid" or "pension" schemes under state and county auspices and their more recent counterpart, the federally subsidized aid-to-dependent-children program, family welfare agencies have been enabled to give up most of their long-time relief work and to concentrate their attention on other services. Since at the present time by far the largest source of financial assistance in behalf of needy children who, as the Social Security Act puts it, "have been deprived of parental support or care by reason of the death, continued absence from home, or physical or mental incapacity of a parent"[1] is the aid-to-dependent-children program, we shall concentrate attention on it in this analysis of the part that social work has to play in helping to make the relief aspects of child welfare activities useful to clients.

As has already been stated, about seventy million dollars are paid out and nearly 800,000 children are served by this program annually.[2] The average amounts granted per family vary widely from state to state, for each state sets up its own rules, subject only to certain minimum standards that must be met before the federal government will match its funds.[3] In February, 1938, for example, the average amounts paid per family ranged from $10.41 to $60.39 in the various states, the average being $32.02. Similarly, there is wide variation in eligibility requirements. Some states will grant this form of assistance to a needy father so that he may engage a housekeeper if his wife is dead, out of the home, or physically or mentally incapacitated; some will supplement the earnings of a physically handicapped father; consideration has been given by some states to the adoption of a policy of supplementing a needy mother's part-time earnings. In many states,

[1] Social Security Act, as amended 1939, Title IV, sec. 406.

[2] This is an increase of almost 700,000 over 1934, the last year in which "mothers' aid" operated without federal subsidy.—*Social Security in America,* Social Security Board, Washington, D. C., 1937, p. 237.

[3] According to the Social Security Act as amended in 1939 "federal money is granted only for assistance to dependent children who are in need; but each State decides how much property or other resources a family getting aid for dependent children must have. . . . Provisions about the amount of money to be paid families . . . also differ from state to state. The Federal Government contributes one-half of whatever the State pays to the family up to a combined total of $18 a month for the first dependent child and $12 a month for each other dependent child in the same home. This limits Federal contributions only. The State, may, of course, pay more than this, just as it may also pay less."—*Aid to Dependent Children Under the Social Security Act,* pamphlet issued by Social Security Board, October 1939, U. S. Government Printing Office, 16–10274.

however, these funds are available only for the care of children who are fatherless and whose mothers or other very close relatives remain at home to care for them. Since these provisions and policies vary so much from state to state and from time to time, we shall make no further attempt to be specific about them.

In Chapter X we came to the conclusion that the providing of financial assistance is not in itself social work but that social work services may be profitably employed in connection with it for various purposes, chief of which is that of rendering relief helpful, both psychologically and materially. Much the same questions as those discussed in that chapter arise with regard to the place of social work in the aid-to-dependent-children program. Social work is facilitated there because of the greater possibility of uniformity of policy, for—as contrasted with general relief—the administration of aid-to-dependent-children must by law be carried on through a single state agency if the federal subsidy is to be secured. Locally, however, the agencies dispensing this sort of assistance vary widely and include such authorities as courts, poor boards, and local public welfare departments. Nevertheless, the federal Social Security Board now exercises some control over the persons who actually carry on the work, for the 1939 amendment to the Act says that state plans must "provide such methods of administration (including methods relating to the establishment and maintenance of personnel standards on a merit basis . . .) as are found by the Board to be necessary for the proper and efficient operation of the plan." [4]

In the earlier chapter it was shown that social work in general relief programs is sometimes conceived as being the equivalent of family welfare work under public auspices. The relation of this concept to the theory that poverty evidences individual fault or incompetence was discussed, and the prevailing point of view regarding the distinction between relief and family welfare work was described. This distinction was seen to lie not in the needs of the clients (for doubtless many people in all economic strata have difficulties in their family relationships for which they might profitably seek professional assistance) but in the problems that bring them to the agencies and in the services the agencies are set up to render. The scope of a relief worker's activities must doubtless be wider in a rural than in an urban setting, for there he may be the only source of social work assistance in matters of family welfare. Even so he must be clearly aware of what function

[4] Social Security Act, as amended 1939, Title IV, sec. 402 (a: 5).

he is performing in each case, lest his control over a family's source of income put him in a position of undue control over the rest of their lives.

The need for case work in judging eligibility for aid to dependent children

This same question regarding the scope of social work arises with even greater urgency in connection with the program of aid to dependent children. Here we have a system of financial allowances based on the proposition that no child shall be deprived of his home by reason of poverty alone. This principle is less a declaration of human rights than might at first be thought, however, for its converse is that a dependent child may be denied this form of assistance if his mother or other responsible relative is considered not fit to care for him—even though that lack of fitness is not such as would be judged neglect in a court of law. Most of the present state laws no longer have rigid requirements about the "character" of the relatives in charge of the children for whom aid is requested, but they do say that such children shall live in "suitable" homes.

There is much to be said pro and con that requirement. In behalf of it is the fact that money is given for the children's benefit, and there must accordingly be some assurance that it will be used to that end. Against it is the fact that the requirement may be a means of denying assistance to some children because their relatives' conduct is not such as conforms to the dispensing agency's standards, and that it may result in the kind of surveillance of their activities and limitation of their right to conduct their lives as they see fit that is not provided for in the other branches of the relief system. Discussing the interpretation of the factor of suitability in the eligibility requirements for aid to dependent children, the Director of the Bureau of Public Assistance of the Social Security Board wrote in 1939:

> In some parts of the country laws and plans, which in themselves would permit a liberal interpretation of aid to dependent children, remain limited in application because of hampering opinions and attitudes. . . . It is the day-to-day operation—and its immediate and continuing effect upon children and their families—which clothes this legal framework with reality. And here, although real progress has been made, much remains to be done.
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> . . . Thus, for instance, it sometimes seems to be assumed that if a parent fails to measure up to a particular social pattern, the community may wash its hands of all responsibility for caring for the children. Or,

if the community does accept some responsibility in such cases, it may still attempt to tie strings to the assistance offered: transfer from general relief to aid to dependent children may proceed as if it were a matter of "promoting nice families." Parents whose behavior is looked at askance may be given to understand by inference that assistance may not be available for them unless they mend their ways. . . .

A special aspect of this problem is that of community attitudes toward illegitimate children in need of assistance. . . . No state with an approved plan has legal provisions which would exclude such children . . . but even where aid is given to such children, the conditions imposed may often close the door to any really constructive solution to the family problem. It is, for instance, impossible for a child to receive aid in some states, in cases of desertion as well as illegitimacy, unless the mother takes court action against the father.[5]

As long as suitability of the home remains one of the eligibility requirements, however, it seems especially important that the passing of judgment in individual cases should be entrusted to those who are trained to evaluate the intangible factors that may enter into it. It is in this area that social workers have much to offer, for one of their special competences is to assess personal factors and to take into account the emotional values that, in spite of apparent material and even moral inadequacies, parents and relatives may have for their children.[6]

In addition to passing upon the eligibility for aid to dependent children, a case worker frequently helps an applicant to decide whether he or she really wants to accept that kind of assistance. Involved in that decision is not only the question of whether "charity" (as the applicant may regard it) is distasteful but, often more important, whether the mother wants to abstain from employment and continue her parental role in the absence of a husband.[7]

Arguments regarding the provision of other case work services

Once eligibility is decided upon and the applicant has decided to accept the assistance, the question arises of the further case work

[5] Jane Hoey, "Aid to Families with Dependent Children," *Annals of the American Academy of Political and Social Science, CCII* (March, 1939), 77–78.

[6] Many case records could be cited in support of the latter part of this statement but the novel *February Hill,* by Virginia Lincoln (Farrar & Rinehart, Inc., New York, 1934), makes the point most convincingly and with psychological validity, and is therefore especially recommended for reading.

[7] This point is made by Ruth Karlson, "Eligibility in Aid to Dependent Children," *Journal of Social Work Process, II* (December, 1938), 74–87. See this article for other problems involved in aid to dependent children.

services to be made available by social workers in the aid-to-dependent-children program. We have previously discussed the place of social work in general relief programs and have seen that its main function, as conceived by many social workers, is not that of rehabilitating families (as though poverty and unemployment necessarily evidenced incompetence in the management of family affairs) but that of trying to make the giving, receiving, and withholding of relief a constructive experience for the clients and, consequently, a useful expenditure of funds by taxpayers. The same argument may be used in connection with the program of aid to dependent children, although it may be that applicants are less likely to feel socially disgraced by having to resort to this type of assistance than by being the recipients of general poor relief.

The fact, however, that the assistance is given specifically to benefit children and that it is likely to continue over a long period of time is frequently used to justify a broader program of case work services in connection with it. Involved also is the question of whether aid to dependent children is a relief or a "welfare" service, in the narrower meaning of the term, and much of the dispute about what social work services are to be afforded turns upon it. The courts have ruled that the mothers' aid laws that preceded the present system were welfare rather than relief measures.[8] Nevertheless, aid to dependent children was classified by the Social Security Act as one of the public assistance services, and provision for help with other aspects of children's welfare was put in a separate category. The question, however, is not one to be answered finally by reference to legal rulings or administrative organization but rather by an analysis of the function the institution serves. We shall not attempt such an analysis here, however, but merely point out the contrasting conceptions of the place of social work in the system.

As illustrative of the position of those who maintain that social work in the aid-to-dependent-children program should be devoted to the promotion of children's total well-being, some statements of representative authorities may be cited. In 1940 the National Association for Aid to Dependent Children, a private organization devoted to the promotion of better standards and methods of administration in the

[8] Grace Abbott, *The Child and the State,* University of Chicago Press, Chicago, 1938, II, 229.

work, listed the following as its conception of the purposes of the aid-to-dependent-children program:[9]

1. To preserve normal family life for children in danger of losing it.
2. To preserve kinship ties where these are desirable for the children concerned.
3. To provide financial security by a regular, adequate allowance in the home which will offer opportunities for family planning, for expression of individual taste, and for protection of the family's status in the community.
4. To make available to families aided, through the agency or other resources in the community, health services, parental education, recreational outlets, vocational counseling and placement to the end that such families may become self-sufficient at the termination of the aid.

For the furtherance of those purposes the Association held that certain "service aspects" of the program are required. These service aspects include:

1. Liaison services between the home and the school in the interests of the child's proper school adjustment.
2. Vocational guidance and placement of older children.
3. Medical and surgical care for members of the family, including the disabled parent.
4. Assistance to families in securing proper housing.
5. Expert advice on life insurance conversion, property holdings, and the like.
6. Individual or group instruction in meal planning, buying, food preparation and preservation, nutrition, child care and training and other arts that enter into home making.
7. Assistance to families in securing wholesome recreation such as memberships in character-building agencies, summer outings, and the like.

Along the same line the Director of the Bureau of Public Assistance once wrote: "Important as they are, determination of eligibility and the granting of allowances are only the first steps. Continuing service and guidance in helping families meet the many problems confronting them are equally essential if aid to dependent children is to fulfill its purposes. . . . The purpose of all our efforts . . . is adequate and constructive help to each child and each family in accordance with individual needs."[10]

[9] *Aid to Dependent Children,* pamphlet issued by the National Association for Aid to Dependent Children, 1208 State Office Bldg., Columbus, Ohio. (Undated.)

[10] Jane Hoey, *op. cit.,* p. 78.

The argument is a persuasive one, for it is well known that associated with poverty are many other conditions unfavorable to child welfare. But these conditions also exist in many families that are not on relief rolls, and to those who regard aid to dependent children as a relief rather than a "welfare" measure it seems highly questionable whether the receipt of financial assistance should put a family in a special category with regard either to other services or to supervision of other aspects of their lives. With respect to the latter, parents' rights to deal with their children in their own manner are limited by statute in many ways, but the social worker administering a relief scheme is not the proper enforcement officer. Similarly, resources for aiding mothers in the care of their children are available to some extent and should be increased. It seems, therefore, that it lies within the duties of a social worker in a relief program (whether one of general relief or one of relief to specific categories of people) to bring cases of illegal neglect to the attention of the proper authorities and to give to clients who need and desire it information about and assistance in securing the use of other social resources affording help of various kinds. But that social workers in a relief program should undertake the same kind of service as that afforded by family or child welfare agencies to which clients come on their own initiative or use in accordance with their own choosing seems to many social workers a mistaken conception of their function.[11]

This conclusion is an application of what might be stated as a general case work principle: that objectives of relief and rehabilitation should not be combined unless they are expressly so understood and accepted by the client. To be more specific, on the legal side, aid to dependent children is granted when application for such assistance is made and certain conditions laid down in law or administrative regulations are found to obtain in a family. It would therefore be an infringement of a client's legal rights if he were denied continuance of assistance because he did not take advantage of other services that were offered, such as having his children's tonsils taken out or sending the children to summer camp. Probably aid would not be discontinued for that reason, but the thought that it might be discontinued could

[11] It may be necessary for social workers in rural areas to carry on both relief and other activities because of the scarcity of other resources. If so, it is particularly important that social workers make clear to their clients in what capacity they are operating—relief worker, visiting teacher, probation officer, and so on—and that they do not use any one of their services (such as relief or probation supervision) to control other aspects of their clients' lives.

be equally damaging psychologically to a client (enhancing either his dependency upon the social worker or his resentment against him); and clients might well have such fears if social workers both dispensed financial assistance and urged upon clients these other forms of service that they thought were for the children's good.

Examples of situations in which case work may be needed

If the objective of securing for the children the most favorable environmental conditions possible is renounced, what are some of the other problems (in addition to those of determining eligibility and the continuing need for relief) that occasion the use of social workers in this program? To answer this question in detail would require many concrete examples, but a few situations can be described in general terms.

First, there are problems centering around the calculation of a budget. Among them are the following. The amount of aid—within the limits prescribed by law—to any particular family is based upon the family's income and other resources and the children's requirements for food, shelter, clothing, and other necessities, and, usually, medical care. The maintenance requirements of the relatives who are providing a home are not included, although general overhead expenses—such as those for rent, light, and heat—may be taken into account. The calculation of a budget to cover these items may be a rather complicated procedure which might be thought best entrusted to a specialist in household planning. It has been found, however, that best results are secured—in terms of co-operation and the preservation or development of that sense of responsibility on which so much of constructive family life depends—when clients take an active part in such planning and calculations. To secure their participation and to clarify what part in the budget-planning process is their responsibility, and what part belongs to the representative of the agency, often requires special knowledge of individual psychology and group customs, and special skills in the establishment of human relationships that are among the technical assets of a trained social worker.

Again, along the same line, budgets have to be continually adapted to changing needs. Then, too, questions frequently arise as to what the money may be spent for, what—if any—limitations on a family's activities the receipt of this form of aid imposes, what actions on its part will result in a change in the size of allowance. For instance, aid to dependent children is not available to physically or mentally handi-

capped children unless they can qualify on the same basis as other children, nor is it given for the assistance of children who are in institutions. On the other hand, temporary residence in a hospital does not disqualify a child. A family may need help, therefore, in deciding whether to have a mentally defective child committed to an institution or to use, for instance, a sanatorium for a tuberculous child who might be cared for at home. This question and many others have to be answered on an individual basis; and if the impression of arbitrariness of decision is to be avoided and the relatives' sense of participation in the planning is to be maintained, there is much need for case work skills.

In the course of this planning and its attendant discussions, the children's relatives (perhaps the children themselves, if they are old enough to participate) are likely to want to talk about other problems and needs. With some problems that do not involve the use of outside resources or that involve the question of whether or not to use such resources, a case worker can give immediate aid, his services in this area being of that "counseling" nature that has been illustrated in Case 12 (page 268). In other situations, resolution of the difficulties may require the use of other organizations—schools, hospitals, recreation centers, churches, social agencies, such as those affording child placement or family welfare services, and so on; and the knowledge of how to use these services and how to avoid taking the responsibility for their use away from a client (thus depriving him of his customary status as a person who makes his own arrangements) again calls for case work skill.

Another kind of problem that usually comes up for discussion centers around when to lessen or discontinue aid. The relatives with whom the children live (a mother, frequently, or an older sister or a father who is partially incapacitated) may want to work outside the home; there may be a question of whether or not the children should continue to attend school after the age of sixteen; [12] the mother may be considering remarriage.

These and numerous other situations come up for discussion and for decision about allowances. All in all, there is much scope for the kind of services that social workers are specifically trained to give. Through their use, the receipt of aid in behalf of dependent children

[12] Federal money may be used to aid children up to the age of eighteen if they remain in school. All states give assistance to children up to sixteen, and many have raised the age to eighteen, especially for those attending school.

can often be rendered a more socially constructive experience—both to the relatives and to the children—than might be the case if the assistance were given in a mechanical manner and without that individual adaptation to clients' needs and desires that case work affords.

Social Work Regarding the Welfare of Children in Their Own Homes

In addition to programs that have been instituted for the financial assistance of children who are handicapped by both poverty and the loss or incapacity of a parent or parents, there are those whose aim is to meet the needs of children whose family life is unsatisfactory for other or additional reasons. It was shown above that in the early days attention was centered chiefly upon children who suffered from neglect or abuse or other extreme handicaps to their physical or social well-being. With improvement in social and economic conditions (the establishment of a free and compulsory school system, better medical and recreational facilities, provision for the relief of financial distress—in short, better social organization for meeting basic needs), the number of cases of this type has probably decreased, though there are still enough of them to require considerable work on the part of courts and welfare agencies. In the meantime social concepts of what constitutes adequate home life for children have altered (for the better, we are of course inclined to think), and child welfare organizations have accordingly broadened their programs to take into account many children who in earlier years would not have been thought to be in need of their services.

The services to be described in this section of the chapter are those that have to do with the social welfare of children in their own homes. Originally organizations carrying on what is now called "protective" work with children centered much of their attention upon removing children from home. As has been shown above, the children's aid societies put their agents to work in the slum areas of large cities to seek out vagrant children and to prevail upon parents who did not or could not give children adequate care to take advantage of the free homes the organizations offered to provide. Other organizations followed suit, some of them setting up child-caring institutions instead of placing children in foster homes. With changing ideas, however, as to the importance of family ties, the emphasis of

the work of many organizations has shifted to giving assistance to parents and children in their own homes with various problems of family life, including those that earlier were deemed severe enough to necessitate breaking up families.

Types of agencies and programs

The organizations affording this kind of help are of various kinds. Family welfare societies do much of this sort of work, although application for their services is usually originally made on the basis of general family needs rather than those of individual children. Children's aid societies also engage in this work. Some of them limit their assistance to helping applicants decide whether they do or do not want to place their children in foster homes, and refer them to family welfare agencies for further help if a decision against placement is made.[13] Others give more varied forms of aid. In the more strictly "protective" work (that is, services specifically designed to protect children from the damaging effects of bad home conditions) the humane societies, societies for the prevention of cruelty to children, juvenile protective agencies, and the like play a prominent part. Then there are organizations devoted to special categories of children—the illegitimate and their mothers, adolescents, migrants, and others. And, for rural areas, there are the "child welfare services" financed in large part by funds provided by the Federal Social Security Act.

"Protective" work under private auspices began with the establishment of the New York Society for the Prevention of Cruelty to Children in 1875, its special function being conceived as that of prosecuting cases of cruelty and neglect and securing the punishment of the responsible adults. In some cities and states (the organizations soon began to operate on a state-wide basis) the agents of the humane societies, as they came to be called, were given police power and often had at least semilegal control over the children who became wards of the state. Protective work on behalf of adolescent girls and unmarried mothers and their children was also early organized, the services of these agencies including the provision of temporary "shelters" and homes. In addition to work on individual cases, protective agencies devoted much attention to the improvement of community conditions, both through private efforts and the promotion of legislation. Through

[13] How long and complicated a case work process the arriving at such a decision may involve is illustrated by a case described by Gordon Hamilton in *Theory and Practice of Social Case Work*, Columbia University Press, New York, 1940, pp. 294–319.

their work public attention was directed to the need for eliminating "baby farms" and various forms of child exploitation, for regulating dance halls, and for removing other moral and physical hazards to children and young people. As juvenile courts, women's police bureaus, and other legal agencies for safeguarding children's welfare became established, however, need for these activities on the part of privately financed organizations decreased, and the protective agencies began to give attention to the less extreme forms of child neglect and exploitation[14] and to provide case work services.

For many years activities in the field of child care and protection were largely confined to urban areas, although some children's aid societies and protective agencies operated on a state-wide basis. Some states and counties provided services in behalf of neglected and ill-treated children through their public welfare departments, some of them having divisions or bureaus especially devoted to child welfare. In most rural counties, however, juvenile courts and poor law officials were the only source of assistance to children, and they usually provided only meager financial aid or maintenance in inadequate child-caring institutions or ill-supervised foster homes.

Improvement in this rural situation is being achieved, however, under the "child welfare" provisions of the Social Security Act. Under that act $1,510,000 is appropriated annually for the "payment of part of the cost of district, county, and other local child welfare services in areas predominantly rural and for the developing of State services for the encouragement and assistance of adequate methods of child welfare organization in areas predominantly rural and other areas of special need."[15] The services thus financed are described as being for the "protection and care of homeless, dependent, and neglected children, and children in danger of becoming delinquent." Eligibility for their help is not dependent on financial circumstances, and assistance is offered to children and their families without regard to economic status.

In consequence of this federal subsidy there has been a considerable expansion of state child welfare programs. In 1936, for example, only twenty-seven states had child welfare divisions in their public welfare departments, while by 1940 the number had increased

[14] Cases involving actual cruelty to children have decreased greatly, accounting for only 6 per cent of the Boston agency's cases in recent years. C. C. Carsten's "Neglected Children," *Encyclopaedia of the Social Sciences,* III, 405.

[15] Social Security Act, 1935, Title V, sec. 521.

to forty. In that latter year a sixth of the counties in the country were providing social services to children under public welfare auspices, forty-five thousand children being served by about five hundred professional workers.[16] This is still not a large program, it is true, but it is said to be unusually successful in bringing to light numerous previously unsuspected problems of child health, family neglect, inadequate housing and nutrition, and poor parent-child relationships.[17]

Under these public child welfare services, wider activities than those customarily provided by individual agencies in urban centers are carried on. The clients include children who require foster care, those who present conduct problems in school or community and so are regarded as "in danger of becoming delinquent," mentally defective and physically handicapped children for whom arrangements for treatment or custody need to be made, as well as children whose home conditions appear to be disadvantageous to their welfare. Most of the work of the agencies, however, has to do with children in their own homes rather than with foster care. In this they differ from many privately financed, urban agencies, much of whose work centers around placement in foster homes, or the provision of care in shelters, detention homes, and other kinds of children's institutions.

Types of services

With such a variety of agencies at work in the field of "child care and protection," as it is called in social work parlance, it is rather difficult to generalize about their services, even in the limited area of work with children in their own homes. Broadly speaking, however, several types of services may be distinguished. There is, first of all, strictly "protective" work—that is, services that are aimed at securing children against neglect, abuse, or exposure to unhealthful or immoral conditions. It has been found that such unfortunate conditions are not always either deliberately or carelessly created by parents but are often the result of ignorance or misfortune or lack of adequate re-

[16] Editorial, "Child Welfare Services: Our First Line of Defense," *Social Service Review*, XIV (1940), 731, 732, 736. This article summarizes various significant statistics on this subject, most of them derived from the *Fourth Annual Report of the Social Security Board* (1938–39). See also Mary Irene Atkinson, "Child Welfare in Rural Counties," *Annals of the American Academy of Political and Social Science*, CCXII (1940), 209–15.

[17] For a description of some of the problems met in rural areas and the work of child welfare workers see *Proceedings of the Conference on State Child Welfare Services, April, 1938*, U. S. Department of Labor, Children's Bureau, Maternal and Child Welfare Bulletin No. 3, Washington, D. C., 1938.

sources. Accordingly, it is held that just as children should not be removed from home because of poverty alone, so, too, foster care should not always be secured even in cases of apparently unwholesome home conditions. Instead, some protective agencies try to help parents work out plans that will meet at least the minimum needs of the children.[18]

Such protective services are usually entered upon at the request of somebody outside the family. Schoolteachers may report that children are uncared for; neighbors may complain that children are mistreated; the police may intimate that they will take action unless conditions are remedied. The protective agencies, therefore, start upon their activities in a very different relation to their clients from that which is usual in social work. As a matter of fact, their work is often not social work at all but rather that of legal authorities. When, however, they do engage in social work and undertake to help parents provide more adequately for the welfare of their children in their own homes, they cannot avoid the authoritative position in which their agency's function places them. Their responsibility is that of securing proper care for the children, and they cannot retire from the case—as a family agency worker would—if their services are not desired by the parents. Even in such a situation, however, basic social work principles may be observed (the client's right to privacy, and the right to make his own decisions and to live his life as he pleases within the limitations set by law), and families may frequently be helped to work out plans that are in keeping with their own desires. Case 14 illustrates this aspect of protective work and includes the writer's comments upon it.

Case 14 [19]

The Waldrons were referred to the S.P.C.C. after a conference of interested agencies. There was every evidence of neglect but nothing specific

[18] It must be noted in this connection that no social agencies have the right to insist on parents providing better conditions for their children than the law requires. They cannot "break up" families on the basis of their own standards of what is good for children; and it is only the semilegal protective agencies that are set up for the express purpose of safeguarding children against parental neglect and abuse. Other children's agencies, like most social agencies, enter upon their activities only at the request of clients, or at least only after it has become clear that their services are desired.

[19] Adapted from a case cited by Alan Keith-Lucas, "The Case Worker in Protective Complaint Work: Responsibility in the Approach," *Bulletin of the Child Welfare League of America,* XX (February, 1941), 3.

that could be brought into court. There was a large mixed family by the previous marriage of each parent and by the present partnership. Home conditions were terrible, and the children dirty and ragged. Mr. Waldron was, however, unwilling to place his children and resentful when approached.

Before the worker could state more than her name and agency when she called, Mr. Waldron shouted that she should stay out of his affairs. The worker replied that she had been asked to call because of the children. The community did not feel that they were receiving proper care. Both parents began to talk at once, Mr. Waldron saying that it was a lie, Mrs. Waldron screaming and sobbing that it was the truth. It seemed to the worker that "she had been keeping this to herself and that the relief to pent-up emotions was brought about by the worker's entry." After a while the worker said that there seemed little doubt that they were having trouble, and she wondered what they were going to do about it. . . . Implicit in her statement was the demand that something be done, yet she did not presume to tell the Waldrons what they should do. Only if they did nothing would the worker assume authority and insist that the children be cared for somewhere.

Each parent blamed the other and proposed dividing up the family. The worker did not question this but said she would call in a week to help make what plan seemed best. When she did so she found them already beginning to move toward a solution of their problem. Each saw improvement in the other. Mrs. Waldron could recognize that her husband's physical condition was making things harder for him. He in turn showed a real effort to come to grips with the situation. As the case worker put it, "He hated to be condemned by the agency. . . . He did not want his wife to leave but if she felt she must, she could do so. The present conditions were not fair to the children, but he did not know how to make them better. . . . If he felt placement was the best plan he would not care, but he was not sure yet."

The worker continued to call to discuss the difficulties with the Waldrons. At the end of four months the home seemed to be running on a fairly even keel and Mr. and Mrs. Waldron were showing increasing affection for each other. . . . The children benefited by the calmer atmosphere in the home and were happier and better cared for. The worker, who came into the home unwanted, even resented, was now a welcome visitor to whom Mr. Waldron proudly showed his new pigeon-loft, by which he hoped to increase his income.

How was this accomplished? The personality and professional integrity of the worker undoubtedly had much to do with it. She was not disturbed by Mr. Waldron's anger, she was not drawn into their quarrel, she was

able to let them express themselves freely and yet remain friendly and interested. But perhaps it was her clear understanding of her responsibility, both to the commmunity and to the Waldrons, that helped most. Could they not acknowledge her right to insist on adequate standards for the children just because she did not insist on the way that was to be achieved? On that basis they could accept her help and begin a reorientation of themselves around the focal point of the children's care.

Another kind of service that social agencies afford to children in regard to their family life is that of supervision and planning in the mother's absence or when she is inadequate, physically or mentally. Typical cases are those in which the mother is dead and an older child is trying to keep the family together; those in which the mother is not capable of carrying on her normal duties but there is a strong sense of family solidarity among the children; those in which the children are in special need of the mother, even though she is not a very adequate person.

Another service is that of counseling with adolescent children concerning the difficulties they face in adjusting to the demands of family life. Among cases of this type are those of children who have run away from home, those who are contemplating such action because they find life at home so unpleasant, those who are regarded by their families as antagonistic or un-co-operative or inexplicably sullen, remote, or silent.[20]

Finally, there are many cases in which the service of the social agency consists chiefly in planning with parents and children (or perhaps only with the parents if the children are very young) regarding how to deal with the problems that living together involves. Frequently such cases come to the agencies' attention because the parents are considering foster care for the children, feeling that they can no longer cope with the difficulties. Fairly representative of the way a social worker may be of assistance in such cases is Case 15, in which it will be seen that the social worker's ability to appreciate the clients' feelings and to help them to try out their solutions to the problem resulted in reinforcing the strengths in their relationship with each other.

[20] For a description of some cases of this type see Helen L. Friedman and Betty Meyer, "Treatment of the Adolescent," *The Family,* XXII (1941), 20–24.

Case 15 [21]

Mrs. Minter telephoned the Children's Bureau, saying that the high school principal had said we might be able to help her. It was about her stepdaughter, Joan, aged sixteen. She had taken care of Joan since April (it was now November) without any assistance from Mr. Minter, and now he had written Joan that he wanted her to come and live with him. Mrs. Minter said he was not a proper man to have Joan. He deserted them last spring and has never written to anybody but Joan since. Mrs. Minter had insisted that Joan write and ask him for money. He replied by saying Joan should come and live with him. Mrs. Minter said that Joan knows what kind of man her father is and that she would be safer and get her three meals a day if she stayed with her stepmother instead. Mrs. Minter continued by explaining her financial status (she runs a small café in an industrial district of Los Angeles) and her difficult situation since Mr. Minter left, for he had encouraged a rowdy lot of people to patronize the place and had got into legal entanglements over his employment practices. She, however, was beginning to make a go of the restaurant now, but she needed Joan to help her, and Joan would do nothing but wash a few dishes.

Mrs. Minter continued her monologue by saying that Joan had lived in England for some years after her mother's death, and it was a mistake that eight years ago she and Mr. Minter had sent for her to come and live with them. Mrs. Minter has always had to fight her battles alone. She isn't getting help from anyone, even Joan. Things would not have been so bad if Mr. Minter had not taken to drink after their marriage. She blamed much of her situation on that, as well as on his weakness and poor character, and feared Joan might inherit his alcoholism. Then—as though she had said too much against Joan—she added that Joan has her good points, they are often confidential with each other, and people tell her that she is sometimes too strict with Joan. She gave some examples of this but justified herself by showing how her strictness had saved Joan from misfortune. After further description of her hard lot in life (she had once been a certified public accountant) and the present unsatisfactory conditions under which she lived, she asked whether the worker could help her keep Joan (they are company for each other, and she could give Joan a good home if only she could get some money out of Mr. Minter) and work out a financial plan.

The next day the worker called and found the family in a shabby restaurant, furnished with a long wooden counter and cheap stools, a

[21] Abstract of a case record, Children's Bureau of Los Angeles. The case worker was Ellen T. Marshall.

few booths, and a couple of tables in the middle of the room. A girl behind the counter inquired in a unfriendly manner what she wanted and gestured to a girl sitting at a table behind the door, "There's her daughter. You can talk with her." Joan, an attractive adolescent dressed shabbily but in good taste, had apparently not been told about the worker's expected visit. The worker gave her name but not her business and asked to talk to Mrs. Minter. Joan, with a rather hard, grim expression, went to the back of the building and appeared with Mrs. Minter, who—contrary to expectations—was pleasing in appearance, courteous, and fairly at ease. She asked the worker to come to the back of the house and told Joan to come too, saying, "This concerns you, Joan." Joan looked startled, shrugged her shoulders, and followed. The interview took place in a very small bedroom, which was the only other room in the house.

Mrs. Minter turned to Joan first. "I asked this lady to come out from the authorities and talk to you, Joan. I want to have things settled once and for all. I want you to make up your mind today just what you want to do about things." Joan sat rigidly on the bed, a hard, impenetrable look on her face. She glanced at the worker, who smiled reassuringly, but she looked quickly away again and gazed at the floor. Mrs. Minter hurried on to say that things would not be this way if it hadn't been for Joan's father. She repeated some of yesterday's story and emphasized what an expense Joan had been to her, adding that she thought Joan didn't appreciate what she had done for her. Joan turned quickly and said huskily, "I do, too!" To which Mrs. Minter replied, "You have a funny way of showing it!" For some time the interview consisted of Mrs. Minter's telling of Joan's misdeeds and Joan's defending herself. Then Mrs. Minter returned to a description of Mr. Minter—the desertion, the legal troubles, and so on—after which her talk slowed down and she began to cry.

After a pause, the worker said, "How terribly unhappy you two people are! So much has happened to both of you that it is no wonder you get on each other's nerves. You have both been badly hurt by the same man, and it is very hard to take it. Some things are so hard to face because they are so disillusioning." Both Joan and Mrs. Minter looked at her in surprise. Mrs. Minter responded by saying that she had once loved Mr. Minter and what a blow it was when he took to drink and spoiled their home life. She tried to think of reasons for his behavior—perhaps he got into the wrong company, perhaps she had nagged too much. . . . And then to see him treat his own daughter that way; it was more than she could bear. It was always she who insisted that he give Joan money; it was she who was interested in Joan's welfare. And then he went off with that waitress. She felt sorry for Joan and wanted to see her happy. There are so many things that Joan wants that she can't

give her. Joan complains that they don't have a home and family life. God knows she would like to have that kind of home too! If she could get her affairs straightened out and rent a small apartment, things would be much better. Maybe she had been unusually cross lately. It was a matter of being worried about finances and Joan's behavior, and she had been sick too. She showed the worker her angry-looking varicose veins and told of how her nerves often hurt so badly that she could scream. Then, too, she doesn't trust her employees or her customers; she is sure they walk off with food and money when she is resting. That is why she had hoped that Joan would work in the restaurant and help her. If Joan goes with her father she will be very unhappy. He may still have "that woman" with him, and she won't give Joan a good home.

The worker responded, "You certainly have enough to make anybody unhappy. Have you talked these things over with Joan?" No, said Mrs. Minter, she never had. She wasn't one to talk about her feelings much. Besides, she didn't think Joan cared. "I thought it was better not to let her know I was upset. She might lose her respect for me." The worker remarked that she thought Joan was an understanding person but she supposed both of them were so preoccupied with their own worries they didn't have much thought about discussing matters. She then turned to Joan and said she must have had things to irritate her too—no home to which she could bring her friends, not the kind of clothes she wanted, not much energy because she was growing so fast. Perhaps the men customers were annoying sometimes. Then, too, maybe she felt lonely, and maybe it hurt her to hear Mrs. Minter talk that way about her father, even if he had left them. She wondered what Joan thought about her father's invitation to her to join him.

During this recital of her possible woes Joan lost her hard expression and finally said with feeling that she didn't care what became of her now. She had been fighting most of her life for a home and people who wanted her. She is sick of sticking her chin out and getting it smacked. She is not going to say what she wants. The worker can make any arrangements she pleases. The worker responded by telling Joan about the agency. It doesn't force people to do things; its aim is to help unhappy people to work out the plans they think will bring them greater happiness. Under no circumstances should Joan and Mrs. Minter think she was there to "push them around." She wanted to be their friend and to help them work out their misunderstandings. She looked directly at Joan and said quietly, "You don't have to be afraid of me, Joan. I like you and want to help you." Joan smiled. It seemed hard for her, as though she had not smiled for a long time.

Mrs. Minter then asked Joan to give the worker the latest letter she had received from her father. The worker said that letters are personal

things and maybe Joan would rather just tell her about it, but Joan handed the letter to her. It turned out to be well written. Mr. Minter called Joan "dear" and "sweetheart," told her he regretted her unhappiness and his present inability to send her money, told her to keep her chin up; as soon as he got steady work he would send for her.

When Mrs. Minter had left the room the worker remarked to Joan that a letter like that must be a help. Joan began to cry and said she couldn't forgive her father for having gone away. Things were so different when her mother was alive. In response to the worker's suggestion, she said he shouldn't have married again; she could have taken care of him. He shouldn't have sent her to England. He never drank when he lived with her mother. It was all Aunt Mabel's (the present Mrs. Minter's) fault. She couldn't let him alone but kept nagging him and driving him crazy. "The lady he went away with was a little like my mother." Joan was talking in low tones now. She said it was true her father probably wouldn't give her a good home. She had always liked Aunt Mabel, who was fine in everything except about her father. She had tried to give her things and had even gone without necessities so that Joan could have fun. She is sick and unhappy now. When she is well things are different.

When Mrs. Minter returned, the worker suggested they talk over possible plans. She said maybe they needed a vacation from each other for a while; if so, she might be able to arrange for a temporary home for Joan. Joan and Mrs. Minter inquired further about that possibility, and Joan wanted particularly to know whether she would have to work for her keep. The worker told of both work and boarding homes but said she thought the latter would be better right now. Then she said that an alternate plan would be for Joan to go to her father, and a third would be to stay where she was and try to work things out with the worker's help. If a boarding home were decided upon, there would be the question of finances. Since Mrs. Minter couldn't pay, they would have to find out whether Mr. Minter would make a contribution or whether the agency would be willing to help them. Mrs. Minter replied that her legal matters would be straightened out soon, and she would know better where she stood. In the meantime they would talk things over.

When the worker left, Joan said, "I sure am glad you came," and Mrs. Minter followed her to the door to tell her that she thought she understood Joan better now. The worker suggested that since Joan is growing up, Mrs. Minter should try to be more of a companion than a mother to her. Mrs. Minter replied that Joan was still immature and needed a strong hand over her but that she would try to be more companionable with her.

Within the next two weeks the worker called to leave some clothes she had found for Joan. Mrs. Minter was in a hospital for some days and

Joan was away at the time of each visit. After Mrs. Minter's return home she was found to be very angry with Joan and insisted that the worker take her away immediately. The interview consisted of a recital by Mrs. Minter of all the things Joan had done wrong while she was in the hospital and a defense by Joan of her activities. Finally Mrs. Minter said in high rage, "I have given you plenty of warning, Joan. The last time Miss Jones was here I thought her talking had done you some good but I see you don't intend to pay attention to anybody. I have taken all I'm going to from you. Now you can get out!" After a protest from Joan that she too was sick, the worker said it seemed to her that they had come to the parting of the ways for the present. It might be, however, that this was due to Mrs. Minter's illness and the fact that the café business was going poorly—both of which would make Mrs. Minter find caring for Joan particularly hard. She would suggest, therefore, that they try a boarding home for Joan for one month before making a final decision; and she turned to Joan to ask her what she thought of that.

Joan burst into tears and said she didn't care what happened to her. She was tired of struggling for things. She had been just as sick as Mrs. Minter, and she had tried to do her share of the work. All she wanted was a home where she didn't have to live on schedule. She was sick of having to get up at six in the morning, not being able to sleep at night because of the noise in the café, and not having a place to bring her friends for a little fun and conversation. The worker said she would go ahead and see about a home for Joan for a month. She would also write to Mr. Minter, but perhaps Joan would like to write to him first and tell him about the plans. Finding a home would take a couple days. Mrs. Minter agreed to try to make a go of things over the week end.

A good home in a near-by school district was located, and the worker telephoned to tell Joan about it. She did not sound very enthusiastic and said that, although she would do what the worker wanted, she would rather wait till they heard from her father. Mrs. Minter then came to the phone and told in a friendly manner of how changed Joan had been since the last visit. She apologized for her temper display at that time and said she guessed she had just been worn out and desperate. She too wanted to wait with arrangements till Mr. Minter was heard from, and she added that she would be pretty lonely without Joan. The worker said she understood how things were and agreed to postpone plans.

A few days later Mr. Minter wrote to the agency offering to pay for Joan's board. Mrs. Minter, on being told about this, was rather angry, saying that if he could afford to do that he could give the money to her; this proved that what he really objected to was her keeping Joan. With

this latter the worker agreed and suggested that they therefore had better go ahead with the temporary boarding-home plan. Mrs. Minter then accused the worker of trying to take Joan away from her, said she would use this letter in court to get money out of Mr. Minter for Joan's care, and so on. The worker told her that under no conditions would she give her the letter to use in that way and pointed out that such action would so antagonize Mr. Minter that he would do nothing further to help them work out plans for Joan. Mrs. Minter calmed down a bit at that, said she saw the point, and promised to think things over before taking action.

The same day Joan telephoned to the worker to say that she had decided that she would stay with her stepmother for the present, since she needed her so much. Asked whether she really meant this or was only saying what her stepmother wanted her to say, Joan replied, "I really mean it. In spite of everything I'm fond of Aunt Mabel, and I don't want to go away from the only home I've known." The worker told Joan that she was not trying to force any plan on her and that she and Mrs. Minter should get in touch with her if they had any further need for her help. Mrs. Minter then came to the telephone and again apologized for her remarks. She said she had been thinking matters over and wondered whether the worker could write to Mr. Minter and tell him that so much of Joan's unhappiness was due to lack of money. Perhaps he would be willing to send it to them instead of to a boarding home. The worker agreed to write such a letter.

A few days later a call revealed a much more satisfactory situation in the Minter home. Mr. Minter had sent Joan ten dollars, which she was using to purchase clothes. Mrs. Minter attributed that to the worker's letter, but the worker assured her that she had not yet written. That made it all the better, said Mrs. Minter, and she went on to say that they were grateful for the way the worker had helped them to make plans. "You seemed to understand, and you didn't make us do things," she said. Mrs. Minter was now optimistic about her business. She had two new waitresses, the customers were coming back, Joan was working in the café and saying she was glad she had not left home, and plans were on foot for getting a small apartment.

Later a letter to Mr. Minter brought a cordial response. He continued to send Joan money, which—in Mrs. Minter's opinion—she spent wisely. Mr. Minter said that he thought that Mrs. Minter and Joan were really fond of each other and that he had told Joan that he would not take her away as long as she liked living with her stepmother. He had advised Joan to get in touch with the worker if things went wrong. The worker in her final call emphasized her willingness to be of service if setbacks occurred. Mrs. Minter closed the interview by telling about the

plans for the new apartment and saying, "We are going to fix it all up nice and then we will invite you out to see it."

Social Work in Connection with Foster Care Facilities

In spite of the fact that money is available for aiding dependent children and that agencies provide parents and relatives with various forms of social work assistance in regard to problems of child care, it will already have become apparent that there are many situations in which foster care for children either must be resorted to or is preferred by parents. A child may, for instance, require foster care because his parents or relatives cannot secure enough money to maintain the home in the way they desire, because they are ill and cannot afford to pay for his care, because they do not want him or cannot manage him, because he has no parents or relatives who are both able and willing to give him a home.[22] Sometimes the need is for a permanent home, in which category adoption is to be included; sometimes only temporary care is required, the extreme of which is to be seen in the facilities day nurseries afford.

Foster care is provided in various ways, ranging from informal private arrangements through which parents and foster parents find each other to those involving court action and the state's permanent custody of the child. The types of social agencies that provide foster care for children—either through foster homes, child-caring institutions, or a combination of the two—are also numerous. As classified by the census authorities they are: state, county, and municipal welfare departments; child-placing departments of juvenile courts and long-time detention homes; state, county, and municipal agencies and institutions; fraternal, religious, and nonsectarian agencies and institutions doing child placement work or giving institutional care; family agencies with special children's departments; maternity homes which keep children after the mothers are dismissed from care. Excluded from this list, although also providing substitute homes for special types of cases, are institutions for delinquents, detention homes for short-time care,

[22] Contrary to popular belief, full orphans constitute only a small proportion of the children for whom foster care is used, being 10 per cent in 1933. There should be added to that number, however, another 20 per cent of cases in which one parent was dead and the whereabouts of the other unknown or the whereabouts of both were unknown. Both parents of almost a fourth of the children in foster care were alive. In this connection it is also of interest to note that only about one seventh of the children under foster care in 1933 were illegitimate.—*Children under Institutional Care and in Foster Homes, 1933,* U. S. Bureau of the Census, 1935, pp. 39, 45.

and institutions for the physically or mentally handicapped. Day nurseries should also be included, since they substitute for homes on a part-time basis. With such variation in auspices it is not unexpected to find that philosophies and policies about foster care differ widely and that it is difficult to generalize about programs and methods. We shall, accordingly, not attempt to make anything like a complete survey of the work, especially since our primary interest is in the part that social work plays in connection with it.

Day Nurseries

Whether social work service is considered necessary by day nursery administrators and for what purposes it is employed depend largely upon what the chief objective of day nursery care is held to be. Day nurseries were originally designed to provide daytime care for the young children of employed mothers who otherwise would have had to leave them at home under inadequate supervision.[23] Later the children of mothers who were ill or otherwise incapacitated were admitted to nurseries, the objective in providing care for them being essentially similar. Under this custodial conception of the nursery's function, day nursery administrators are not likely to see much need for the services of social workers, for the chief criterion for a child's admission to a nursery is the mother's need for this form of assistance, as judged by her employment status, income, and absence of other means of caring for the child. The day nursery's service consists of trying to keep the children clean, well fed, well supervised, and happily engaged in activities. If the children do not respond well to such care or the parents are dissatisfied, administrators of day nurseries of this type are not likely to feel the need of offering them further services, although some few supply social workers to look more closely into the children's home conditions.

A very different conception of day nursery care is held by those who regard the nursery chiefly as a part of a program for improving family life. Under this conception the chief purpose of the nursery is held to be that of helping children and parents who are experiencing difficulty in family relationships to live more harmoniously together.

[23] The first nursery was founded in Paris in 1844; American nurseries date from the 1850's. Many of the European nurseries were maintained by industrial establishments and governmental authorities, while most American ones have been supported by religious organizations or private philanthropy. Under the stress of wartime conditions government-financed day nurseries are being proposed.

The fulfillment of this objective is regarded as the joint task of the day nursery and the family welfare or children's agency; hence these nurseries are likely to look to the other agency for case work assistance. Social workers are used by such nurseries both to help the administrators decide which applicants are most in need of the nursery's facilities and most likely to benefit from them and to carry on case work with the parents in regard to family problems while the children are being aided by the nursery's program of activities.

Very different from either the custodial or the family welfare conception of a day nursery's purpose is that which makes the nursery's prime aid that of furthering the growth and development (social and psychological as well as physical) of each individual child. This educational objective day nurseries are held to share with nursery schools; in fact, in the opinion of some authorities, the distinction between the two types of organizations is very slight, being chiefly one of the economic status of the parents and the greater variety of services that need to be made available when mothers have little money and are employed all day long.

When case workers are employed by day nurseries that have this educational aim, their work with parents is likely to be of a very different nature from that of family case work. (Their point of view and methods would appear to be applicable to child-caring day nurseries also, for many of the same questions in regard to their use and procedures would arise in the parents' minds.) In their interviews with applicants, for instance, these case workers are not concerned with seeking evidence of difficulties in family relationships or judging whether daytime care of the child away from home would prove beneficial. Instead, they are, on one hand, determining whether the child is eligible for day nursery care and, on the other, trying to give the applicant some idea of what is involved in using the nursery as means of solving his difficulty in providing care for his child. The admission procedure and the nursery's requirements (vaccination, daily physical examination, fee scale, and so on) are explained. These facts, which might be stated in a routine manner by an admission clerk, the case worker recognizes have different ramifications for each applicant, and the case worker uses them as concrete means of giving the applicant an opportunity to decide whether day nursery care is what he really wants. The applicant's decision will be furthered by a case worker's description of the nursery's activities and by his observation of them. In addition, the case worker tries to give the

child a share in deciding whether to join the nursery group. Through these interviews the case worker will be able to sense something of what sort of person the applicant is, why he is seeking the nursery's help, and whether he is likely to be able to make use of what it offers.

If these discussions eventuate in the child's attending the day nursery, the case worker will be available to the parents for discussion of other questions connected with the nursery and the child's and the parent's use of it. For example, the nursery may use unfamiliar methods of disciplining children, may have routines for eating, sleeping, and playing that are different from those the children are accustomed to at home, may impose restrictions on attendance because of minor illnesses, and so on—all of which matters parents may want to discuss, protest, or at least have explained. Mothers may have continuing doubt as to whether to use the nursery or care for their children at home. Ability to pay the fee agreed upon (the amount charged is usually based upon a family's income) may alter from time to time. Discussions about these and other matters connected with the child's or parent's use of the nursery are believed to be best left to a case worker, for they often require careful individualization if the parent is to make his decisions in a way that is most helpful to the child.

An example of this kind of work is provided by the following extract from a case record of a child in a day nursery. It shows how a case worker may help to make even a child's withdrawal from a nursery a constructive experience both for him and for his mother. The worker was able to do this, it will be noted, because she was keenly aware of how this mother and child would be feeling about the situation: the child wanting to remain in the nursery and yet also wanting to please and comfort her mother; the mother wanting to have the child at home and yet fearing the nursery workers would disapprove of her plan.

Case 16 [24]

Fritzy was placed in the nursery when she was fourteen months old, and she was four and one half when Mrs. Harmon took her out. Mrs. Harmon always resented the fact that she had to work because her husband could not support her and the children as she wished. Fritzy

[24] Dorothy Curtis Melby, *The Dynamics of Functional Casework in a Progressive Day Nursery,* The Salvation Army, Baltimore, 1940, pp. 18–20.

liked the nursery and was making great progress in the group. At the same time she was deeply concerned about the strain between her parents and was especially sensitive to her mother's moods. Mrs. Harmon had indicated several times that she might try something other than working, but always the security of her wage and her need for a higher living standard and Fritzy's wanting to stay at the nursery carried her decision. In June, before she took Fritzy out finally, she planned with me for Fritzy to stay at home for the summer vacation with her and the eight-year-old boy. Mrs. Harmon wanted this to be only a partial leaving, wanting to bring Fritzy to play with the children every afternoon. She was able, however, to accept a real break for the summer, and Fritzy knew a week before she left that she was to go. In September Mrs. Harmon came back to apply for entering Fritzy again. She asked our help with Fritzy's eating problem but almost immediately took the problem outside to their private doctor. Fritzy was well adjusted in the group again but Mrs. Harmon gave little indication of making much use of the experience.

Mr. Harmon came to the office early one morning to say that Fritzy was staying at home now. The superintendent asked that Mrs. Harmon come in to see me, which she did in the afternoon. Mrs. Harmon had Fritzy with her (this was her first day out) and I don't know when I have seen two more forlorn-looking people. Mrs. Harmon was almost in tears and Fritzy stood beside her patting her arm. Mrs. Harmon told me that she was really sick and that she would have to stop work and stay at home. She went into a long story, telling me exactly what was wrong with her. When she had finished I made no comment. After considerable pause, she burst out, "Of course, that's not exactly what is wrong with me. It's my nerves. The doctor says it is." I said that it seemed to me that she really wanted to stay home and keep Fritzy with her. With much feeling she said yes, she did; she wanted to stay home right now and she wanted to keep Fritzy home right away.

Tears came to her eyes when she said that we had raised Fritzy and she had never had her. It suddenly dawned on her that next winter Fritzy would go to public school and she would never have a chance to stay at home and have Fritzy there all day long. She is willing to live on bread and water so that she can stay home and have her baby there like other women do. I said I thought that this seemed more important than having the clothes she liked and the apartment. I commented on the fact that she dressed herself and Fritzy with a great deal of taste and that she certainly had a flair for decorating her home. This pleased Mrs. Harmon very much. She added that of course she could not have these things unless she worked, but now she knew that she could do without them, at least for a while until Fritzy goes to public school.

I said I thought that perhaps Fritzy would like to come to the nursery this week and have a going-away party at the end of the week. Fritzy was already beginning to feel better, and with this her little face just beamed. She left her mother and climbed up on a big chair in the middle of the room. Swinging her feet she told me in great detail about the going-away party for Angela which was in the early part of the summer and the one for Mary Jane in October. She knew why each child left and what they were going to do at home. Angela was going to help her mother scrub floors and get a new baby to play with. Mary Jane was going to the country to live and have a cat and a dog and chickens. Mrs. Harmon said that she hadn't realized until now what leaving meant to Fritzy. Then she turned and asked Fritzy if she would like to stay in the nursery this week and have a party on Friday. She explained to her that she would bake her a cake and come to the party with her. I asked Fritzy if she would like to stay in the nursery today. She smiled and nodded, and I went to get Miss Olson. When Miss Olson came to the door Fritzy ran to her happily, saying that she was going to stay in the nursery this week and have a party; then she was going to stay home and help her mother.

After Fritzy left, Mrs. Harmon told me that she had had no idea that Fritzy's staying at home meant so much, or for that matter, that leaving the nursery was very important for her. She had only been thinking about herself. She was glad that she came in today. I said I thought, too, that perhaps she would feel better having it this way. She was sure that she would and she was glad that I thought it all right for her to stay home and keep Fritzy at home. She knew that Fritzy learned a lot and liked to come to the Junior Kindergarten.

All week the nursery school teacher and the group leader talked with Fritzy about her staying at home with her mother and about the party she was going to have on Friday. She did not take her nap on Friday but stayed up and helped the adults set the tables and decorate. She wore her party dress which the other children called her "going-away" dress. Mrs. Harmon came with the cake. It was decorated in pink and white and had Fritzy's name on it. Mrs. Harmon told me proudly that she had made the inside of the cake pink and white also.

Mrs. Harmon told me how Fritzy had talked all week about leaving; she thought she now really wanted to stay at home with her. Then Mrs. Harmon talked about Fritzy's sudden change in feeling toward Sue Balderson. Until this week she had seemed to hate Sue but now she was planning to give Sue the two birds on her cake. Mrs. Harmon supposed she wanted to "square up" before she left. Later Fritzy gave the birds to Sue with great ceremony and it was hard to tell who was the more

pleased, Sue or Fritzy. Fritzy helped her mother cut the cake and Miss Olson helped Fritzy serve all the children. When they had finished eating, the children gave Fritzy a little set of tin dishes to take home with her. The expression on her face indicated that she had reached her peak. She turned to her mother and asked to go home but on second thought decided to let Sue play with the tea set a while. Her mother waited for her and talked with me about how pleased she was with the way the cake turned out and how much she was looking forward to keeping house and having Fritzy with her. I thought that this seemed a happy ending for a long coming to the nursery. Mrs. Harmon was able to express her feeling that she was so glad that it was like this. Once during the afternoon Mrs. Harmon referred briefly to her illness, immediately was much embarrassed and changed the subject. She invited the group leader to bring the children down to see Fritzy's Christmas tree. In the midst of loud and happy goodbyes from the children, Mrs. Harmon and Fritzy left. It was hard to believe that they were the same people who were in my office on Monday.

It will be seen that the case worker's service here consisted in helping the mother to discontinue her use of the nursery's services in such a way that she felt comfortable about doing it and did not need to resort to illness as an excuse. This was obviously of great help to the child, for the little girl had sensed her mother's indecision and unhappiness and was torn between desire to remain in school and desire to comfort her mother by accepting her plan for leaving. In arranging for the child to remain an extra week and plan her going-away party, the case worker not only made it easier for the child to round out her nursery experience and to leave happily but reaffirmed for the mother the nursery's approval of her decision to withdraw the child. In these ways the case worker carried out the general function of social work: to help individuals to use a social institution and thereby to help the institution fulfill its purpose more effectively.

Child-Caring Institutions

As in day nurseries, the place of social work in child-caring institutions is a disputed question. It is said that in 1935 there were no social workers on the staffs of half of the child-caring institutions in the United States and that very few of the social workers who did hold such positions were professionally trained.[25] This situation may be

[25] Minna Baldauf, *Institutional Child Care*, published by *Social Work Today* as Pamphlet No. 4, 1940, p. 9.

partly due to the fact that for years institutions have been somewhat in disrepute as a means of caring for children other than those who are in special need of close supervision, such as certain groups of delinquents or some mentally defective or physically handicapped children.[26] So widespread is the preference for foster homes that many erstwhile child-caring institutions have been converted into "study homes," from which children are placed in boarding homes after a period of observation. In recent years, however, the opinion has been gaining ground that some children are better served by institutions than by foster homes. This is now thought to be particularly true of adolescents, since they are likely to be in a stage of development in which they resent parental restrictions and respond better to congregate care with others of their own age group.

At present child-caring institutions may be classified into three main types. First, there are those old-fashioned ones that operate under conceptions about foster care that were formulated in the last century; it is seldom that they do much deliberate individualizing in their work with children. Second, there are institutions that are an adjunct to a placement program; and third, there are a few institutions that have been organized, or reorganized, in accordance with modern psychological theories and that limit their intake to children who are thought to be in special need of the kind of care they can provide. Whether or not a child-caring institution has social workers on its staff and how it uses their services depend largely upon which of these categories it belongs to.

The administrators of many child-caring institutions consider their duties fulfilled when they have determined that the children who apply for admission meet the eligibility requirements (for instance, that they have no other source of support, or that they are needy orphans of Masons in good standing, or that their fathers were soldiers or sailors or belonged to whatever other specially designated class the institution was established to serve), and when they have provided the children with adequate shelter, food, clothing, and instruction. Other administrators, however, want to know about the previous circumstances under which the children who come into their charge

[26] In spite of the disrepute sometimes attached to child-caring institutions, there were about 1,600 of them in the country in 1940 as compared with about 400 child-placing agencies.—Cheyney Jones, *Social Work Year Book, 1940,* Russell Sage Foundation, 1940, p. 112. At the end of 1933 there were 140,352 children in institutions of one kind or another as compared with 102,577 in foster homes.—*Children under Institutional Care and in Foster Homes, op. cit.,* p. 4.

lived and about their general training, habits, and personality—not only to help them decide whether the children are eligible for care but to give them some understanding of the children's behavior in the institution. Such administrators are likely to employ social workers to gather this information, especially if they think that more than the asking of simple questions is required.

That such investigations can be a part of social work, according to our conception of social work's function and methods, will be clear upon a little consideration. On the one hand, they are an indirect means of helping the individual children to utilize the institution, for the information so secured may be later used to individualize their treatment. On the other hand, such investigations enable the administrators and the rest of the staff to discharge the social function of the institution more effecively. As to methods, when effectively carried out, this social investigation aspect of social work requires that careful individualization and that consideration of the peculiar nature of the difficulties a client encounters in specific social relationships which is a characteristic of the most highly developed forms of social work. As a matter of fact, it will be found that social work in connection with each social institution, including that of the family, started with this service of social investigation, and it was only after some time that its other services developed or were found to be useful.

Once added to the staffs of child-caring institutions, social workers are likely to be also used for what was originally called "after-care work" (that is, to make arrangements for the children's leaving the institution, for finding them homes, jobs, perhaps recreational resources, and so on), as well as for keeping in touch with the children's families while they are in the institution's care. Here again, as in the case of social investigation, there is great variation in the spirit and the methods with which the work is carried on. It may be of a very routine character, limited to seeing that relatives are informed about a child's health and progress in the institution and that they know when he is returning home, making sure that a job is available and adequate living quarters are provided—all of this without much regard for the individual differences among the people concerned. After-care work may, on the other hand, consist of a real attempt to help the relatives with these and other matters, such as the problems they face in having a child away from home or having him return to their care, or in understanding his desires and needs and his reactions toward his experience in the institution and toward them-

selves. In these and other ways social workers in child-caring institutions may help to facilitate a child's social adjustment away from home and make his transition to life at home and in the community easier and more beneficial.

In some child-caring institutions social workers play an even more prominent role. They may be used as "intake workers," their job in that capacity being not only to form an estimate of the children's needs and the ability of the institution to meet them, but to give the relatives an opportunity to ask questions and decide on the basis of a descripition of the institution's regulations whether they want to use its services. These workers are likely to interview the children also, both in order to give them some share in the decision about leaving home, and in order to prepare them somewhat for life in the institution.[27]

Then, too, social workers may work directly with children while they are in the institution. There they have a twofold service to offer. They are available to the children for discussion of questions regarding their home situations or other aspects of their social relationships outside the institution—both currently, during their stay in the institution, or in regard to future arrangements. They also offer the children an opportunity to talk about the difficulties they encounter in their social relationships in the institution itself.[28] In both of these ways, it will be seen, social workers are clearly carrying out their primary function of helping individuals to make use of a social institution's services, for it is likely that many children can profit more from what the child-caring agency has to offer (education, recreation, some of the benefits of home life) if they can be relieved of worry or confusion about other aspects of their lives.[29]

Foster Homes

The early history of placement in foster homes and the place of social work in connection with it have been described in the preceding

[27] How much may be involved in this process and how case work of this type may be carried on is well illustrated in two cases described by Gordon Hamilton, *op. cit.*, pp. 238–41, 294–319.

[28] For a description of some of the problems a child in an institution may want to talk to a case worker about, see Lillian J. Johnson, "Case Work with Children in Institutions," *Proceedings of the National Conference of Social Work* (1940), pp. 335–43.

[29] For further discussion of social work in child-caring institutions see Chapter XV. Although delinquents present some special problems, there is much in common between the care afforded them in institutions and that given to other children, especially since many of the clientele of child-caring institutions are so-called problem children.

chapter. There it was shown that social work in that field developed in response to the discovery that delinquent and near-delinquent children need something more than new homes to overcome their antisocial tendencies. Children's aid societies early found that individual consideration had to be given both to the peculiar character of each child's situation and behavior and to the choice of a home for him and to his supervision in it. This kind of individualized service was soon recognized as of value to destitute children also, with the result that social work in connection with child placement became firmly established.

It is to be noted, however, that the finding of homes and the placement of children in them are not in themselves social work. This is a service that can be carried on in a mass manner (as witness the wholesale gathering up and transportation of homeless children to the Middle West that characterized the early work of the New York Children's Aid Society) or for profit, as is the case with individuals or organizations that supply babies and children for adoption. In either case the social welfare of the children may be promoted; but social work begins only when to the child-placing facility are added those activities that help the individuals concerned (the parents, the children, the foster parents) to make use of it.

Child placement organizations that are deemed to be social work agencies do not consider it their task to supply lists of available foster homes to parents seeking care for their children, nor do they confine their work to effecting contact between people who want homes for their children and those who want to supply homes. Instead, in accepting children for either temporary or long-time placement in foster homes, they themselves assume responsibility for the children's care, sometimes requiring that the relatives' giving over of responsibility be made a matter of court record. That relationship having been established, child placement agencies that are engaged in social work center their attention around fulfilling the consequent obligations to the children and helping them, the parents, and the foster parents with the problems that arise out of this substitute-family situation. The services of such agencies, therefore, are confined to people who want to give their children over, temporarily or permanently, into somebody else's care, who want to relinquish certain aspects of their responsibility for them. An important part of social work in connection with child placement accordingly consists of explaining to the adults concerned the conditions under which the given agency accepts children,

the responsibilities it assumes and those that are left to the parents or relatives, and of discussing with them whether they want to use the agency's services under those conditions.

Examples of typical situations in which foster-home care is sought

Before considering further the activities of social workers in a child placement program, we shall present some examples of the kinds of situations in which people seek this sort of assistance. The cases described are representative of those that came to the attention of an urban children's aid society in about 1930. It will be noted that neither destitution, neglect, nor delinquency was involved in these cases. Destitute children still exist, of course, in spite of the aid-to-dependent-children programs, for there are families that either are ineligible for that sort of assistance or do not want to use it, and there are children who have nobody who can assume responsibility for their care. Destitute and neglected children, however, usually become wards of the state through court action and are placed in foster homes or institutions through its agents. State authorities may, of course, carry on their activities in accordance with social work principles, but some differences in work to be done arise because many wards have no homes to which they can return. As to delinquent children (and those who are considered "problems" by reason of home influence), placement in foster homes is frequently used for them also, but in the cases that involve court action, additional problems for foster-care agencies are involved.

The gamut of problems that bring children to the attention of child-placement agencies is as wide as all of family life. Some idea of their diversity and consequently of the variety of services needed to meet the difficulties is suggested by the following cases. The first is illustrative of that great number in which the presence of the child is believed by the parents to be the cause of their domestic disharmony. Although other reasons, usually financial, are also adduced in such cases, this is the crux of the problem.

Case 17 [80]

This case was referred by a friend of the wife with the explanation that the young couple were in financial straits owing to the husband's

[80] This case and the following ones are condensed versions of some of those described by Bertha C. Reynolds in "An Experiment in Short-Contact Interviewing,"

having to work for a much lower salary than he was accustomed to, and that it seemed best for the wife to work to maintain the standard of living. This would involve boarding the baby, and the wife would appreciate advice as to finding a suitable home.

The wife, a young girl with a good deal of charm of personality as well as prettiness of features, began by saying, "Of course I hate to give my baby up now that he is so cute but I think that if you could place him in a home where he would have good care, it would be the best thing." Then, within a few sentences, she said, "It is the interference of his people that has nearly wrecked things for us. They wanted him to marry a society girl with plenty of money, and they just couldn't see me at all." The care of the baby had been the greatest source of friction. "It is funny afterwards, but it hurts at the time when he says the baby hasn't had a good meal since last June when his mother got it for him." She would feel worse about it if it were not so absurd when the baby weighs twenty-five pounds, has had toxin-antitoxin and everything recommended by the baby health station and *they* think he's a fine youngster.

Then followed discussion about the lack of money, the poor apartment, which was the best they could afford, the lack of fresh air for the baby. The social worker asked the mother whether, if money did not enter into it at all, she could be happy at home taking care of the baby. The mother said she would like to do it, but when everything she did was criticized it made her nervous. She thought she would feel better to have some outside contacts. "I'm not ninety years old yet and I do like a good time." She said she and her husband never go out together, although her mother would take care of the baby. He thinks she should have no interest in going out. Then, after more discussion about the boarding home arrangement, she said in reply to the social worker's question about whether her marriage meant much to her that she had hoped that if the baby were having good care her husband would be satisfied and they could patch up their differences.

The next case is the kind in which a child interferes with the parents' other plans, so that they want the child taken care of by outsiders for the time being. Adoption is not desired, nor would financial assistance solve the problem. If it is argued that such people ought to "be made" to take care of their children, the answer is that nobody can force them to do it, that there is no law against people boarding

Smith College Studies in Social Work, III (1932), 54–99. For more details about these cases, descriptions of others, and an unusually penetrating discussion of the whole question see this monograph. It may interest the reader to know that not in every one of the cases cited here were the children placed in foster homes.

their children, and that these are not cases of neglect in which a court could exercise authority.

Case 18 [31]

The mother came into the interviewing office stepping daintily, a slight figure with artificially gold hair in short curls around her face, delicately drawn eyebrows of a darker color, straight-looking grey eyes, and an engaging smile. She was becomingly dressed and was wearing a close-fitting toque and short black fur jacket with ermine collar.

As she sat down, the mother smiled and said, "I have the sweetest little baby in the world, and I want the best home that can be found for him, just as a temporary plan till I can have him with me. My family do not approve of boarding him at all, but I've thought it all out and I'm sure I'm doing the best thing." The baby was four weeks old, was "healthy and lovely" and she could pay ten dollars a week board for him.

When she was asked why her family objected to her plan she said, "Well, you see, they can't understand how I feel about the profession. I was just getting started on Broadway last May when I got pregnant, and while I would not have missed having the baby for anything, I want to go on with my work. My family just can't understand what it means to me. It gives me something I've always longed for and that satisfies me all through. My folks came from up in the country, and they don't see things my way. . . . My plan is to take the baby in six months, after my husband and I get settled, I get a job on Broadway, and we get a good maid."

The social worker asked how the father felt about the plan. "He agrees with my family," the mother said. "He would like me to give up the stage and can't understand why I can't. He wants to get an apartment right away and a good maid, but he doesn't understand that a baby cries at night some. I couldn't look after a baby nights and work, and neither could he stand to lose sleep. He doesn't realize that as I do, now that I've been home with baby two weeks."

Then there are many families, like the one in Case 19, in which the parents, because of unemployment, low wages, health considerations, and so on, cannot provide the kind of home they think a child needs. They are devoted to their children, willing to contribute financially to their care, but not able in their present economic circumstances to maintain a suitable home.

[31] *Ibid.*

Case 19 [32]

Husband and wife came to the agency together. The mother told the first part of the story. "Well, you see, my husband has been out of work a long time and we had a home and lost it, and the boy got sick and I took him to the hospital. They said he had tuberculosis of the glands of the abdomen and sent him to a convalescent hospital, where he's been for six months. So now the baby [it turned out he was twelve years old] is ready to come out, but there is no home to come to. I live where I work [as a telephone operator in a hospital] and *he* lives with his sisters." At this the father broke in to say that the boy looked "wonderful" and that he did not want him to lose it all. At home he would not eat, and "if I didn't give in to him, the Mrs. would." Where he is they have trained him to routine and he's got to keep it. "I want him to be out in the country, about forty miles out, maybe, where there's a good school, because, you see, he will have to make his living by his brain (and he has a good one too) and where he can play outdoors with the boys after school and come in and be in bed by eight o'clock at night."

"What about your situation?" asked the worker. "I'm living on charity," he replied, with a considerable force of bitterness. "I'm walking the streets. I bunk in at my sisters' where I sleep in the parlor and do most anything to get along, but I'm not saying that it is comfortable. It doesn't matter about me. Only about the boy. I'm registered with the Emergency Unemployment, and I can have work when the boy becomes a charge on me. You see, as long as the hospital out there takes care of him I'm a single man. *I* can go sleep on the Bowery. I have promise of work in the park for three days a week at $5.00 a day as soon as the boy comes out."

The father said he was "one of those white-collar workers, chasing a pen for twenty-two years." He had worked for the same company for many years. The mother got $50 a month and maintenance as a telephone operator in a hospital, and there was another son, seventeen, who was just about able to support himself while living with his grandparents. This boy worried the parents a bit by going out nights, but Samuel, "the baby," was called by his mother "a beautiful soul" and by his father "a boy that everybody likes."

In contrast there are parents who really want to be rid of their children. The reasons are many. It may be because they cannot manage them, because the children interfere with their lives, because for many reasons, clear and obscure, they dislike the children and think they will

[32] *Ibid.*

be much happier without them. Among such cases are some unmarried mothers, such as the one in Case 20.

Case 20 [33]

The mother, a young Negro girl who seemed very nervous, said she had a child, two months old, that she wanted to "put away" for a year or two so that she could get work and support it. She wanted to get a place in service with living, since she had been laid off at the hat factory. She hesitated, and then said, "My sister would support me as far as that goes, so there is no trouble about that." About her parents she first said they were dead, then told that they lived far away and didn't know about her having a baby without being married. "You see they are very strict and have social position at home and I couldn't have them disgraced."

She had come to New York to live with her sister and go to college and attended evening sessions last winter. Her sister and brother-in-law were not urging her to put the baby out but she had thought it over and decided it was best. Her sister has lived in New York for five years and has friends with whom she should not be disgraced. In a year or two she might marry the baby's father. He is not married and would marry her, but she can't decide to do so. "He passed a remark I didn't like, and I don't think I care to marry him," she said in explanation. To the social worker she seemed an immature school girl, uncertain of what she wanted or could do, more conscious of her family's fine standing and of the disgrace to them than of anything else.

As a last example Case 21 is cited to stand for that type of case in which a home is broken up by discord or desertion and the parent who is left with the children must find some way of having them cared for while he or she earns money for their support.

Case 21 [34]

The mother said that she has tried again and again to live with her husband because she cannot manage the support of the children alone, but it is impossible. She is so worn out with the terrific strain of it that she can go on no longer. She started divorce proceedings last May when he was living with another woman and giving her money for the children so spasmodically that she could not count on anything. She took him to court, but he continued to be impossible about payments, and for lack of money she had to drop the divorce proceedings. She finally made complaint that

[33] *Ibid.*
[34] *Ibid.*

she was receiving no money and he was sent to the county jail for six months. "Did he care anything about that? Not in the least. He snapped his fingers at them all." . . . Later he came to her and asked her to take him back. The children were glad to see mother and daddy together again and he promised to help her to make a home. But it didn't work. Now they are to separate finally.

The mother worked as a canvasser for a laundry company, earning $15 a week. She shared an apartment with another woman, whom she paid $10 a month to look after her two boys at lunch time and after school. As to her plans, the mother said she was utterly at the end of her rope, physically and nervously. Many days she has collapsed while getting ready for work. After a long day of walking she finds housekeeping and proper care of the children impossible. In applying to the agency she was asking for some temporary plan until she could "get on her feet." Her hope was that she would get a better job, a cheaper apartment, or that her husband would contribute some money. She kept asking, "Do you think it is right for me to board my children?" She said she dreaded placing them because "people who take children just want money. They have no interest in the children." When told of the agency's plan of searching for good foster parents and working with them in supervising the children, she said, "Do you mean you find people with love in their hearts for children?" And she later asked, "Would I have *anything* to say about their care?"

Five cases can give only a hint as to the variety of situations which make people think it would be better that their children live somewhere else than at home. We have given no examples of those numerous cases in which the child's own conduct and the influence of the home situation on it is the point at issue, nor of those in which the parents are so grossly negligent as to be brought to the attention of legal authorities. Nor have the cases in which there are no parents or suitable relatives been mentioned, nor those in which the children themselves are eager to get away from home. These and many others make up the clientele of agencies that work in the field of foster care.

Two schools of thought about child placement work

To return now to a description of the activities and objectives of social workers in connection with child placement programs, it will be found that there are two main schools of thought about the matter. The one is in the social work tradition that reached its height in the writings of Mary Richmond. The other bases much of its practice on

the psychological principles that have been formulated in more recent years.[35]

The main objective of child care, according to the first group, is to provide an environment—physical, psychological, and educational—that will develop the children's potentialities to their fullest capacity so that the children will grow up to be thoroughly self-reliant adults. Such an assumption of responsibility requires that the social agencies have well-trained staffs, excellent equipment, facilities for obtaining all manner of information about the children's lives and potentialities, and complete control over their circumstances.

Agencies working under this philosophy use both institutions and foster homes as means of caring for children. They try to determine very carefully which sort of environment will be best for the individual child and sometimes keep each child for a time in a "study home" in order to learn to know him well before choosing his foster home. On the whole, they are inclined to prefer foster homes to institutions, as coming nearer to duplicating the family life of which the child is deprived, but it has been found that some children, particularly older ones, do better under congregate care.

The similarity of the social work carried on by these agencies and that which characterized the work of most family welfare organizations until recently is seen in the mass of information about the children which is collected: long histories about their parents' past lives, the reasons for the family breakdown, the relatives whose help might be enlisted, their personalities and economic resources, detailed descriptions about all aspects of the children's lives—medical, educational, social, psychological—and the findings of doctors, psychologists, and psychiatrists about their present status and future potentialities. Similar inquiries are made into the personalities and social and economic circumstances of the people who apply for the position of foster parents. When all this information is gathered together, a great effort is made to evaluate the child's needs and to find the foster home that will most precisely meet them. The old slogan, though not nowadays so frequently expressed, still obtains: that there is one best solution for every case and that it is the social worker's responsibility to find it.

Underneath all of this are several assumptions about child nature that seldom come to the surface of the worker's consciousness. One is that children are too young to take any responsible part in the making

[35] For a statement of some of those principles see Chapters VIII and XI.

of plans about their welfare. Another is that they are only temporarily affected by unpleasant events, such as leaving their home, and that they quickly forget in a pleasant atmosphere. A third is that if they do not respond favorably to "good" care, they are to blame, and if things go badly enough, the agency can wash its hands of them. This latter point of view has been somewhat modified by the recent infiltration of psychological concepts, but, by and large, these do little more than give a name—like "maladjusted" or "neurotic" or "psychopathic personality"—to a condition long since recognized. When psychological theory does greatly modify practice, the foster care agency may attempt to "cure" the children of the psychological disorders, either through the case workers' efforts or through adding a psychiatrist to the staff. By this means the agency seeks further to assure that the children will grow up to be self-sufficient adults and takes even more responsibility for that outcome.

All of this is perfectly logical and praiseworthy (as are also the other systems of child care if their underlying assumptions are judged to be correct) and is so much in line with what most of us believe about the purpose of life that it is at first difficult to see what improvement could be made in it. If, however, one can free himself from thinking in generalities and tries to put himself in the place of the individuals—parents and children—concerned, it will be clear that the work of a foster care agency can be conceived in much different terms.

Those who form the second school of thought among foster care workers hold that the agency is set up to give and called upon to give help with present, often emergency, situations to people who retain responsibility for managing their own lives. Even when the agency is made the legal custodian of a child, it does not actually take a parent's place. The agency performs certain parental functions—provides shelter, food, clothing, the cost of medical care, and indirectly supervises education and recreation—but not even the foster parents whom the agency secures can take the parents' place in every respect. They cannot make the children their own (the attitude of people in the community toward even adopted children bears witness to the fact that a status is acquired by kinship that cannot be simulated), nor can they usually be depended upon to stand by the children through all vicissitudes. A child deprived of a family for whatever cause lacks certain advantages that cannot be supplied through other sources. A modern foster

care agency accepts this fact and the assistance it offers is based upon it. It does not hope to do away with the disability.

When the work of the agency is conceived in these terms, emphasis is not put upon the future and the preparation of the child for it (which would involve planning about and controlling all aspects of a child's life) but upon giving assistance to parents, children, and foster parents with the practical aspects of the present situation and the doubts and perplexities which arise out of it.

Underlying this conception of function (justifying, in a sense, the apparent retreat from the assumption of greater responsibility) is the psychological principle that each individual contains his own dynamic of growth, which others cannot direct but only foster and strengthen. Parents as well as foster care agencies are limited in what they can do for a child, but both biological and social factors make the parent's part in the growth process much the greater. The agency's part, assigned to it by a court or requested by parents or relatives, is to give professional help in a situation in which a blocking of growth is threatened by a child's loss of position in a normal family group. Sometimes this loss can be averted, as when parents, after talking matters over, decide to use other methods of dealing with the difficulties. More often it must be accepted, and the agency's task then is to work with all parties in the situation—parents or relatives, child, and foster parents—in order to help them meet as constructively as possible the problems that continuously arise in regard to the child's changed status.

Kinds of case work services afforded

To be somewhat more specific, let us consider some of the kinds of service which these agencies offer to the various parties in the situation. Take first the parents, who under compulsion of law (as when they are adjudged neglectful or their children delinquent) or circumstances (such as those of ill-health, marital discord, poverty, or death) or their own desire come to ask for temporary or permanent care for their children. To parents who are not compelled by law to part with their children, the agency workers first offer counsel about the matter. Parents come to a child-placing agency angry or afraid or sorrowful or rebellious, but few of them are certain that foster care is what they want. The social worker gives them an opportunity to talk about this in an atmosphere in which they are neither blamed nor pitied, and the idea of possibly parting with a child is regarded as one a reasonable person can entertain. What is involved in such a plan is discussed, and

the parent is helped to feel out whether this is something he thinks he wants to do.

The parent is aided in this endeavor by certain realities of the situation. It may be, for instance, that he must agree to go through with the court process of committing the child to the agency's care and arrange with the court about the amount he will contribute toward the child's support. (The court may order payment through state or county funds if the parent is unable to contribute.) He probably has to let the agency select the foster home or institution in which the child is to be placed. He must agree to the agency's decisions as to how often he may visit the child and to what extent he may share in the child's rearing. In brief, the agency offers its services on certain conditions, and the parent in thinking through these conditions—and later in experiencing them in actuality—is enabled to test out whether he really wants to part with his child.

With the child the agency worker usually has more frequent contact, though the parent, too, is often seen frequently. The child, like the parents, is faced with what is almost necessarily an unpleasant situation. Few parents wholeheartedly want to give up their children, and probably even fewer children want to be given over to the care of others. The child, however, usually has less choice than the parents about this situation, nor does he have any more control than they do over what kind of foster home is chosen for him. To be in such a predicament is obviously painful, and the social worker who understands children knows that all she can do directly with the child is to help him find his way of adjusting to it. That even very young children can be helped to understand what is going to happen (and, sometimes, why) is, however, one of the discoveries of those who have worked with them in this way.[36]

In her continuing contact with a child a social worker has many things to discuss with him and to do for him. The agency, typically, supplies his clothing, decides upon his school arrangements, provides medical care, supplies money for "extras" and, in general, shares with the foster parents many parental duties. Authority for moving a child

[36] See Marian R. Gennaria, "Helping the Very Young Child to Participate in Placement: The Use of Language, Tone and Repetition in Case Work with Very Young Children," *Journal of Social Work Process,* III (December, 1939), 28–59, for a description of the methods one case worker used with children as young as eighteen months. A description of how a five-month-old child's fear was handled is described by Mary N. Taylor, "A Baby Takes Hold of Placement," *Bulletin of the Child Welfare League of America,* XX (November, 1941), 3–5.

from one foster home to another likewise rests with the agency, but it is held that in order that all these things should contribute to the child's good, he must have a share in deciding about them. Likewise a child's adjustment to a foster home is a continuing process. One distinction between a child's being placed under agency auspices and independently (as when, for instance, his parents find a foster home for him) lies in the fact that the agency affords the child professional assistance with the problems that arise out of that situation. Most children probably could work out an adjustment through their own efforts (those numerous children who were indentured or placed in wage homes by the early children's aid societies generally did so), but the modern foster care agency takes a part in that process and through giving a child a chance to talk about accomplishments and difficulties doubtless facilitates the process and helps to make it more beneficial to many of the children.

With the foster parents also, the agency maintains a continuing relationship. In the first place they are chosen by the agency, usually not for one particular child but as people who seem to be the kind who like children and can be helpful to them. Many practical questions have to be discussed during the selection process, and the social worker has to judge, out of intangible, perhaps even more than tangible, bits of evidence, what kind of person this is who is applying to take children into his home.[37]

If, however, the search for ideal foster parents has been discarded because the agency no longer seeks the perfect environment that will fashion children according to ideal standards, it is not necessary for the social worker to know "all about" the prospective foster parents but only enough to judge whether they seem to have a genuine interest in children and are likely to be able to work with the agency in the care of the children entrusted to them.

Once a child is placed in a home, innumerable questions always arise. For most of these the social worker does not so much supply answers (does not act as a supervisor of a foster parent's activities, as one who is an expert on all aspects of child care and management) as give information on the practical matters that lie within her knowledge and an opportunity to talk about the puzzling aspects of the others. The social worker has, of course, the continuing responsibility to see that the child's needs are being met as well as possible, but this

[37] For examples of the kinds of people who want to board children, see Bertha Capen Reynolds, "An Experiment in Short-Contact Interviewing," *op. cit.*

is accomplished not by telling the foster parents how to carry on their job but by assisting them in doing it in their own way, and removing the child from their home if that way proves unsatisfactory.

Such descriptions give only a hint of what is involved in working with parents, foster parents, and children when temporary or permanent placements must be made. The relinquishing of responsibility for a child's total development, the abandoning of the goal of making him the kind of person the community thinks he ought to be has not meant any lessening of the difficulty of the job of the child placement worker. Instead, this work of "helping a parent and child to separate temporarily or permanently," of "placing an actual child in an actual foster home whose concrete needs and limitations must also be taken into full consideration," and of "sustaining that placement responsibility in relation to the community as a whole" calls for the highest degree of skill and understanding, and conviction and courage.[38]

Suggestions for Further Study

The ABC of Foster-family Care for Children, U. S. Department of Labor, Children's Bureau, Bureau Publication 216, Washington, D. C., 1936.

A handbook descriptive of practices of agencies that operate in accordance with the older social work tradition.

Adoption Practice: Case Work with Parent, Child, and Foster Parent, Child Welfare League of America, 130 East 22d St., New York, 1941.

A series of papers by social workers dealing with various aspects of the adoption process, particularly as it concerns case work with the parents, children, and foster parents. Most of what is said is applicable to child-placing work in general.

Annals of the American Academy of Political and Social Science, "Appraising the Social Security Program," Vol. CCII (March, 1939); "Children in a Depression Decade," Vol. CCXII (November, 1940).

Articles reviewing the history and policies of public and private child-care programs during the 1930's.

Child Welfare Services in New York State, New York State Department of Social Welfare, Albany, 1939.

Good survey of problems encountered in work in rural areas.

Child Welfare Services under the Social Security Act, 1936–38, U. S. Children's Bureau Publication No. 257, U. S. Government Printing Office, Washington, D. C., 1940.

[38] Jessie Taft in Introduction to "Social Case Work with Children," *Journal of Social Work Process,* III (December, 1939), 2.

Hill, Esther P., *Socially Handicapped Children in Non-urban Massachusetts,* Department of Public Welfare, Commonwealth of Massachusetts, 1942.

An analysis of services relating to child care and protection in nonurban parts of the state, with special reference to work done in one area under the Child Welfare Services program. The findings with regard to the community's attitudes toward and use of the services are particularly interesting.

History of Child Saving in the United States, Proceedings of the Conference of Charities and Corrections, 1893.

A lengthy, historical report by a committee of the Conference. Useful for historical background.

Johnson, Lillian J., "Case Work with Children in Institutions," *Proceedings of the National Conference of Social Work* (1940), pp. 335–43.

Johnson, Lillian J., "Use of a Small Institution in Treatment of Personality Problems," *Proceedings of the National Conference of Social Work* (1938), pp. 674–83.

Karlson, Ruth, "Eligibility in Aid to Dependent Children," *Journal of Social Work Process,* II (December, 1938), 74–87.

Peller, Lili E., "Psychological Implications in Institutional Life for Children," *The Family,* XX (1939), 139–46.

Portnoy, Deborah S., "Use of Case Work Skills in Home Finding," *The Family,* XX (1940), 320–24.

Proceedings of the Conference on State Child Welfare Services, Children's Bureau, U. S. Department of Labor, Maternal and Child Welfare Bulletin No. 3, Washington, D. C., April, 1938.

Interesting accounts of some of the state programs conducted under the federal grants for child welfare services, and some of the problems encountered in their operation.

"Report of the Child Welfare Section of the Institute of Government," *California Children,* California State Department of Social Welfare, IV, No. 6 (June 15, 1941).

Reports discussion about child placement work; leader, Elizabeth McCord deSchweinitz. Able summary of practices and policies of "progressive" social work agencies.

Sayles, Mary Buell, *Substitute Parents,* Commonwealth Fund, New York, 1936.

Vivid descriptions of foster children and foster parents and the problems they are likely to encounter in relation to each other.

"Social Case Work with Children," *Journal of Social Work Process,* Vol. III, No. 1 (December, 1939).

Excellent articles describing the theory and application of the case work principles developed in large part by the Pennsylvania School of Social Work and the child care agencies in Philadelphia. Perhaps too esoteric in parts for the general reader.

Standards for Child Protective Organizations, Child Welfare League of America, 130 East 22d St., New York, 1937.

A good description of "protective work," the types of situations calling for this sort of assistance, and the kinds of services rendered.

Taft, Jessie, "Foster Home Care for Children," *Annals of the American Academy of Political and Social Science* (November, 1940). See also her article in the September, 1930, number of the same journal.

These two articles describe the psychological theory on which many of the recent developments in the case work aspects of child placement are based.

White House Conference Reports, *Dependent and Neglected Children,* D. Appleton-Century Company, New York, 1933, *Proceedings of the White House Conference on Children in a Democracy,* U. S. Department of Labor, Children's Bureau Publication, No. 266, 1940.

Williamson, Margaretta, *The Social Worker in Child Care and Protection,* Harper & Brothers, New York, 1931.

A job analysis study describing the types of social agencies in the field and the duties of the various types of workers. Rather old-fashioned conception of the work but useful in giving picture of typical setup and procedures.

Chapter XIV

SOCIAL WORK IN THE FIELD OF CHILD WELFARE: SCHOOLS AND RECREATION

In the preceding chapter some of the difficulties that children encounter in family life were considered, as well as the kind of help that social work affords in overcoming them. The welfare of children is secured, however, not only by their belonging to families that can meet their needs, physical and psychological, whose help they can put to effective use, and in which they can play their expected roles. The lack of such advantages often creates in children an inability to operate well in other group relationships, but it is not the sole cause of that condition or the one around which social workers' efforts always center. For the full development of their capacities and for the securing of the full advantages of group life, children have to be able to make use of the services that schools and medical facilities offer, and they have to be able to join with others in recreational groups and to be law-abiding citizens. This proposition, can, of course, be stated in the reverse with equal validity. Adequate facilities for education, recreation, and the care of health must be provided for children, and social conditions must be created that promote the likelihood of their being law-abiding. It is not the task of social work, however, to provide these facilities (though the profession has the duty of showing why they are needed) but, in part, to direct children and their relatives to them and, in greater part, to help children to be able to use their services.

Social work, however, may be carried on in connection with these social institutions. In that situation it varies widely in both quality and quantity. Case work in child guidance clinics, for instance, has a highly technical body of theory and practice. In contrast, the problem of adapting the principles of social work to juvenile probation and "training school" work has not yet advanced far, although juvenile courts, a probation system, and institutions for delinquents exist in almost all states. Social work services are provided by only a few school sys-

tems, and social work in connection with organized recreation has only begun to be developed. As to social work in connection with the medical aspects of child welfare, not much has been done that distinguishes medical social work with children from that with adults, although medical social workers are being increasingly used in children's clinics. For this reason and others it has seemed best to postpone the description of the medical and psychiatric aspects of child welfare social work until a later chapter, where it will be combined with that of work with adults, and to describe, first, the social work carried on in schools and recreational organizations, and, next, that which is carried on with delinquents and other children who do not conform to social regulations.

Case Work in Schools

Social workers in schools are usually known as visiting teachers, a term that calls to attention the fact that social work in this setting is not an independent enterprise (as is the work of a family welfare agency) but is a part of the educational system and related to its purposes. This is true even if, as in some cities, visiting teacher service is privately financed and administered by its own board of directors. The significance of this observation lies in the fact that, for this reason, visiting teacher work must center around school problems and find its reason for being in the help it can offer to teachers and pupils in that area. The visiting teacher is not a family welfare worker, a child placement agent, or a mental hygienist who maintains an office in a school building because a school is a likely source of clients, nor is he somebody put into the school system to insure that teachers will carry on their work with due regard to their pupils' idiosyncrasies. Rather, he is an integral part of the educational system, with the same sort of responsibility as the school doctor, school nurse, and school psychologist for contributing his skills to the fulfillment of the school's purposes.

This observation is in keeping with our conception of the function of social work. When a family or foster family is the social institution around which social work centers, it necessarily follows that social work is conducted through independent organizations. When the social institution is a relief agency, social workers, if employed at all, themselves dispense the institution's prime service, so that the distinction between social work and the relief agency's own function is sel-

dom noted. When social work is carried on in a day nursery or a child-caring institution, the distinction becomes more apparent, for washing and dressing children, preparing food for them, supervising their education and play are obviously not social work tasks. Nevertheless, since day nurseries and child-caring institutions serve largely the children of the poor, the distinction between these institutions' own activities and those that social workers carry on in connection with them is often disregarded. It is otherwise when social work in schools, courts, and hospitals is under consideration. Here all can see clearly that the social work services are distinct from those of the social institutions in question. What is usually overlooked, however, is the exact nature of their interrelationship.

There are two aspects to that question, themselves interrelated: the services that social workers render to teachers and other school authorities, and those that they render to pupils. The help that teachers seek from social workers is not that of general rehabilitation of those in their charge. They do not say, even by implication, as they might to a psychiatrist or other physician, "Take this child away and fix him up and when he is cured return him to me." Instead, they bring a child to a social worker's attention because they want help in understanding his behavior in school and in planning what they can do about it.

Pupils and their parents, in so far as they are vocal about the matter at all, are likely to agree with this conception of the visiting teacher's task. It seems proper to them that somebody connected with a school should attempt to give help with problems that arise in school. They may, of course, not always want this help, may not agree that a problem exists or that they are the ones to take action in regard to it; but in so far as they are interested in using the social worker's services, the basis for the interest is their concern about difficulties encountered in the school situation.

In consequence of this common-sense recognition of social work's function, the social worker can give help effectively only within the institutional setting; otherwise he is apt to be led astray by the multifarious aspects of each case and to be rejected by both teachers and pupils for overstepping his proper limits. The implications of this statement may become clearer later. We must review first why social work in schools was originally thought necessary and what specific kind of services social workers are called upon to render.

Objectives of various visiting teacher programs

A diversity of opinion about the chief purpose of visiting teacher work has characterized the movement from the beginning. About 1905 a visiting teacher type of service was independently proposed in several cities. In New York and Boston, settlement houses and private organizations interested in public education were the first to make this suggestion, and they jointly provided social workers for several schools. The chief objective of the New York plan was to bring the educational needs of slum children to the schools' attention, while in Boston the need for promoting better understanding between home and school was stressed. In Hartford, Connecticut, the purpose was very different, the first visiting teacher there being engaged by the school authorities themselves to secure social data and carry on social treatment for the Psychological Clinic, a part of the school system. A fourth aim of visiting teacher work is seen in the statement of purpose made by the Rochester, New York, public school authorities when they initiated this service in 1913:

> It is an undisputed fact that in the environment of the child outside of school are to be found forces which will oftentimes thwart the school in its endeavors. While this has long been recognized, yet the effort to remedy such counteracting conditions, as far as possible, has not come to be regarded as an established function of the public school. The appointment of a visiting teacher is an attempt on the part of the school to meet its responsibility for the whole welfare of the child. There are few of the children in our schools who are suffering through the wilful neglect and abuse of parents. Whatever suffering comes for which the home is responsible, comes largely through ignorance and necessity. It will be the function of the visiting teacher to enlighten and aid in relieving. . . . Her aim will be to secure maximum cooperation between the home and the school.[1]

Without going into detail about the historical development of visiting teacher policies and methods, it is to be noted that although these purposes became more or less fused in some of the later programs, there are still rather divergent conceptions as to the main objectives of visiting teacher work. In some schools visiting teachers have

[1] Cited by Julius John Oppenheimer, *The Visiting Teacher Movement*, Joint Committee on Methods of Preventing Delinquency, Commonwealth Fund, New York, 2d ed., 1925, p. 5.

been assigned the duties that usually belong to attendance officers; that is, the enforcement of school attendance laws. In others they handle placements in special classes for the mentally retarded children and those who have physical handicaps. The distinction between child guidance work (which is primarily psychiatric) and that of the visiting teacher is sometimes not clearly drawn, so that—as originally in the Hartford Psychological Clinic—the visiting teachers perform the same function as case workers in a child guidance clinic.

Again, visiting teachers may be used in what is called a general welfare capacity, which is usually taken to mean that it is their task to secure financial assistance and to exercise a protective kind of supervision over the pupils who are most handicapped by poverty and bad home conditions and thus to further the cause of delinquency prevention. Or their task may be chiefly that of collecting evidence, in the form of case studies, on which planning for improvements in school and community conditions may be based. At the other extreme, there is a conception of visiting teacher work that makes it the counterpart of psychotherapy, applicable in cases in which children's psychological maladjustment is not deemed severe enough to warrant psychiatric treatment.

Since there is such a variety of conceptions about the purpose of visiting teacher work and since the number of schools that employ visiting teachers is rather small (about 150 in 1939)[2] it is difficult to generalize about current practices in the field. We may, however, arrive at an understanding of what appears to be the most recent trend, the one that seems to be increasingly winning the support of trained visiting teachers, if we note some of the difficulties encountered by plans that have earlier been tried.

Let us take first the often-stated objective of preventing the development of psychological disorders by the installment of visiting teacher services in the lower school grades. Proponents of this point of view hold that many incipient disorders can be recognized and checked by early treatment, and that schools offer the most favorable opportunity for finding the cases and instituting remedial measures. Both theory and experience throw doubt on the soundness of this proposal. After years of research psychiatrists are fairly well agreed that the prediction of later mental disorders on the basis of childhood be-

[2] Edith Everett, *Visiting Teacher Service Today*, pamphlet issued by the American Association of Visiting Teachers, 1940, p. 2.

havior is usually impossible.[3] In addition they maintain that little of benefit to children is to be anticipated from telling teachers and parents that certain types of behavior (excessive shyness, for instance, or reticence in social contact, or tempestuous mood fluctuations) portend future mental disease, for such an expectation on the part of the lay public is itself likely to handicap a child who is having trouble in adjusting to social situations.

This is not to say that children who display these sorts of behavior do not need special help. They need it, however, because of their present handicaps and discomfort, not because of what may happen to them in the future. In addition, to give fundamental help to children with problems of this nature usually requires the interest and cooperation of their parents; and it has been found that many parents, even when they desire such assistance, do not want it given under a school's auspices. Parents recognize that schools have one function and psychiatrists or psychologists another, and they are likely to think a school is overstepping its rightful limits when it proposes to institute treatment measures in regard to their children's personality difficulties.

With respect to the objective of preventing delinquency, some of the same arguments obtain. At one time visiting teacher work was looked upon as one of the chief hopes of delinquency prevention, for research had shown that many delinquents began their careers as truants from school. Later investigations have revealed, however, that the causes of delinquency vary widely from case to case and that, though many potential delinquents might be recognized in school, schools have no way of exercising control over most of the factors that are associated with delinquency. It is now held that schools can be of greatest help in delinquency prevention by carrying on their own traditional duties in ways that take into account individual children's needs. Curricula and activities that arouse and hold children's interest, teaching methods that take into account their individual ways of responding and developing—these are among the schools' chief contributions to be made toward delinquency prevention.

These, however, are services that school authorities want to render to all children, not only to those who are likely to become delinquent or psychologically maladjusted. They seek the help of visiting teachers when individual children do not seem to be able to make use of the

[3] For a survey of theory and facts in regard to this question, see Helen Leland Witmer, *Psychiatric Clinics for Children, The Commonwealth Fund,* New York, 1940, pp. 261–84.

opportunities offered. In so far as children turn to delinquency because of inability to find satisfaction in school (an inability which may itself be due to factors outside as well as inside the schoolroom), the help which a visiting teacher may render in this area may lead to delinquency prevention. As an immediate objective of visiting teacher work, however, the prevention of delinquency seems untenable, for it directs attention away from the school's main problems and confuses both teachers and pupils as to the visiting teacher's main function. As a writer on the subject has recently pointed out, "One of the first things a case worker must be responsible for, in meeting new children or parents, is explaining clearly why she is in the school, in order that they may be free to ask her for help if they can use it." [4] That children and parents would find it hard to come for help to a person who was known as one who dealt chiefly with bad children and those who are "nuts" is too obvious to need elaboration. It is fear that this is the case worker's function which already seriously handicaps visiting teacher work.

Another conception of visiting teacher service is that which would make it a means through which the environmental difficulties under which children live—especially those of poverty and parental neglect—are relieved. This conception of the work takes two forms. It may mean that the visiting teacher shall spend his time searching for the environmental causes of individual pupils' failure to progress well in school or to conduct themselves well there, and, having found the causes, set about trying to alter the conditions. Or it may mean that through his study of individual cases the visiting teacher shall compile material that can be used for promoting reform of both school policies and community conditions.

The objections to the first plan are similar to those that have been urged against "paternalistic" or "authoritative" case work in general. Actual practice has shown that people—both adults and children—are not likely to benefit greatly from plans that are made for them by others, especially when they have not even requested help. It is one thing to find out why a child does not do well in school, but it is a very different matter—as case workers have frequently found to their dismay—to try, for instance, to "make" parents ambitious for their children's school success, induce them to treat their children fairly and give them the affection they seek, find a job for an alcoholic father and

[4] Edith Everett, "The Importance of Social Work in a School Program," *The Family*, XIX (March, 1938), 6.

see that he keeps it, get a child to give up playing on the streets late at night and join the Boy Scouts instead.

Not only are such changes difficult to achieve, but they are unlikely to accomplish their purpose unless they spring from decisions on the part of the individuals involved. Besides, parents may rightly question why a person representing a school should try to change their lives and their ways of dealing with their children. It is unlikely that they attribute their children's school misconduct or failure to mismanagement of their home affairs, and so they are not likely to take kindly to what they regard as interference. For these and other reasons, the use of the visiting teacher as an agent of family reform is not apt to meet with much success. In addition, the whole plan of setting up what appears to be a general welfare agency under school auspices is likely to be regarded by school authorities and the taxpaying public as outside the true function of the school and only remotely justified as an expenditure of either time or money.

As to using a visiting teacher service primarily for collecting material on which proposals for the reform of school or community conditions may be based, it would seem that this is overstressing the research and community planning aspects of social work. As by-products, such information is certainly useful, and school systems and communities have profited from it. But one would question whether a case worker can contribute really useful material for these purposes except through the practice of sound case work, for his peculiar contribution lies in the understanding of individual needs that he secures through that practice, and it would seem to be rather a perversion of his skills to make of chief importance the reseach rather than the service aspect of his work.

Current methods and illustrative cases

Instead of trying to carry out these various aims, visiting teachers are coming more and more to define their work in terms of offering help to children, parents, and teachers with respect to the problems individual children encounter in adjusting to school or in making use of their school opportunities. The following situations are typical of those that are brought to a visiting teacher's attention by school personnel, who use most frequently the visiting teacher's help:

Bobby, in the kindergarten, loses his breakfast practically every morning. Is this a nutrition or a personality problem? Will you see his mother?

Frances refuses to talk. She is intelligent, always prepared, but will not say a word all day.

John, repeating second grade, can read only a few words. He is pretty good in everything else.

Susan has been getting to school from five to ten minutes late every day for the past two weeks. Her reasons are confused and incoherent. Will you see what you can do?

Tom is restless, defiant, and failing in his work. I know the home situation is bad but really can't tolerate his behavior any longer.[5]

The assistance that a visiting teacher is able to offer in cases like these, says the writer who described them, always involves "an approach from three different angles. She must consider not only the child, who is the object of her major concern, but she must know what both teacher and parent can contribute in meeting their common problem of helping him. . . . Sometimes she decides on only very casual contact with the child and concentrates on interviews with the parent. In such a case her relation to the teacher is one of interpretation, and support in planning class room changes, and keeping in touch with their effect upon the child. Sometimes she and the teacher are able to work it out together with little contact with the home. And in still other cases she works directly through interviews with the child. Her start, however, is always related directly to the difficulty as the teacher sees it—the evidence that something is interfering with the child's constructive use of the school experience." [6]

The following case illustrates how much may sometimes be accomplished through one interview with a parent, in which he is given an opportunity to state the problem as he sees it, to make his own suggestion as to what the school might do about it, and to see how genuinely interested the school is in the child's progress. In this case the teacher's initiative in thinking up ways to handle the child was stimulated by the descripition the social worker gave her of the interview with the father, and it was not necessary for the social worker to work directly with the child.

Case 22 [7]

Michael was a six-year-old boy in the first grade, of superior intelligence and with outstanding ability in reading. In spite of this, the teacher

[5] *Ibid.*, p. 5.

[6] Edith Everett, "Social Work in the School: Value to the Child of Case Work Services," *Visiting Teachers' Bulletin,* XVI (December, 1940), 2–3.

[7] *Ibid.*, pp. 3–4.

was troubled by his behavior in the class room, which he constantly upset by his demands for attention and approval, and by the concern of his parents over the fact that he lost his breakfast every morning before coming to school. When the father came for conference, it was with a real feeling of defensiveness for Michael, and a good deal of emphasis upon the boy's superiority to other children. He pictured him as a child who had learned to read without teaching. He spoke with pride of how at the age of six he reads the newspapers and understands and talks freely about the international situation. Gradually as they talked Mr. G began to see that possibly all this was a little too much of a burden to Michael, and that it might be that he had a real need to be protected from too much knowledge, and to be encouraged in more child-like activities. But he suggested too that possibly the boy was bored by first grade and asked if he might not be allowed to skip a grade. The worker reminded him of the value of first grade as the time when children not only get their fundamentals of school work and learn to get along with other children, but find a real support in the routines of school life, once they have fitted into and accepted them. This was particularly important in Michael's case, since he had not had the advantage of kindergarten experience.

Mr. G brought up the matter of Michael's vomiting. The worker recognized with him the depth of his concern, but spoke too of the number of children who use this way of expressing their fear or rejection of school at the beginning and of how much satisfaction they often get from the amount of attention and concern this creates.

There was plenty of problem in this father's relation to the boy and to the mother, as was indicated again and again as he talked. The worker was well aware of this, and of its significance, but she had learned that by confining her activity to that part of the total problem which related to school, where she had a logical and acceptable function, the other troubles might very probably clear up of themselves. Her conviction was strong that if Mr. G could understand and accept the validity of school procedures and the genuineness of her interest and that of the teacher in Michael, the boy could be freed from the pressure of his father's need to live in *him* so that he would have a chance to start growing for *himself*.

In this case, her hope was justified. The teacher, encouraged by the report of the interview, was able to take back the problem and work out a really constructive approach to its solution. She worked with Michael on his handwriting, which he himself had recognized as his weak spot, thus helping him indirectly to admit himself as really one of the group, where all need help in one thing or another. Six weeks later she reported "excellent adjustment to school. Nothing further heard of vomiting." And at the end of her term, on her own initiative, she recommended double promo-

tion, feeling that he was now socially as well as scholastically ready to work with a more advanced group.

A case at the opposite extreme—in that neither parents nor teacher had much interest in the child, and in that the child himself probably needed psychiatric treatment—is briefly described in the following illustration of a visiting teacher's work.

Case 23 [8]

Albert was a seven-year-old boy of good ability, in the second grade. He irritated the teacher by his indifferent, don't-care attitude, his day-dreaming and masturbation, his poor posture, and careless, untidy homework. An interview with him in the counselor's office centered around a normal small boy's interests but revealed the fact that he felt that his parents didn't care much about him and were devoted to his little brother. This was corroborated in a long interview later with his mother, who frankly—even insistently—admitted that she and her husband had never liked Albert. . . . He got even with her by a kind of passive refusal to show signs of being upset by her treatment, and by just not doing the things she wanted him to do—like washing his face, and doing his homework neatly. A suggestion of the possibility of child guidance clinic treatment brought a reiteration of her statement that she knew it was her fault—and an anxious question as to whether the clinic would try to change her, indicating clearly that she had no wish to be changed. At one point in a later interview she said that she would like to have Albert placed in a foster home, but her husband would not listen to it, though he was absolutely indifferent to the boy and never responded to him in any way.

The case worker sensed that the mother might have some latent affection and interest in the boy and so she continued to visit her from time to time, but she recognized that she could offer no really constructive help until the mother put up less defense against accepting it.

The teacher, too, was not a person who could be a very strong source of assistance to the boy. To sustain her in her day-to-day work with Albert the case worker gave her a chance to "blow off steam" whenever the boy's conduct outraged her, thus leaving her each time with enough sympathy and understanding for Albert to carry her on for a time.

The case worker's chief efforts were concentrated on Albert himself. With him she did not attempt to carry on the psychiatric sort of treatment which she thought he needed and which a child guidance clinic would have provided if his parents had been willing to accept it for him. She

[8] Adapted from case described in Edith Everett, "Social Work in the School," *op. cit.*, pp. 9–10.

did, however, see him frequently, identify herself with and support his efforts to improve in schoolwork, and let him get a degree of satisfaction from his friendly relationship with her, directed as it was by appreciation of his objective interests and achievements.

The case worker recognized that the support which she was able to give Albert and the teacher might help the boy but that it could not make up to him for what he had all his life missed. He would have to learn to live and grow without that if he must, but he would need help in the endeavor. It was the case worker's belief that by consciously using the experiences Albert was having in one area of his life—the school—as the basis for their relationship to each other, she might be able to give him a justified faith in his ability to handle that part of his life and so make the pain of his family relationships a source of developing strength rather than of frustration and conflict.

Two brief cases are not sufficient to illustrate the variety of problems that are brought to a visiting teacher's attention or to show the exact methods he uses in carrying on his work. Our aim, however, is not to describe the technical aspects of social work but to make clear why it is needed and what function it serves. In spite of the diversity of present-day conceptions and practices in visiting teacher work, there appears to be general agreement that its primary concern is the child's effective utilization of the school's facilities. In this relationship to a primary social institution the social work character of the visiting teacher's activities is made clear, and the validity of our definition of social work itself is reinforced.

Some Current Concepts about Social Group Work

Before describing current trends in social work in connection with recreational programs, we must consider, in more detail than in Chapter V, some of the questions that are involved in drawing a line between recreation and informal education, on the one hand, and social work, on the other. The popular conception that the provision of recreational facilities (playgrounds, baseball equipment and leadership, club quarters) is social work if the participants' economic need is sufficiently great would seem to be already definitely disproved—without in the least implying that such facilities are not needed or do not accomplish very important social purposes. The distinction between certain aspects of informal education and social group work is less clear, partly because of the fact that social group work itself has not yet been very

clearly defined. Before describing the part that social work may play in connection with the recreational and informal educational aspects of child welfare activities, it seems necessary, therefore, to elaborate somewhat further upon present concepts about group work.

In traditional social work parlance, group work is classified as one of the fields of social work, and most social work organizations are classified as either case work or group work agencies. Authorities on the subject of group work are now maintaining, however, that their activities constitute a process or a method and cannot be appropriately described in terms of agencies or a field. They point out, on the one hand, that group work is only one of the activities engaged in by even leisure-time agencies [9] and that, on the other hand, the group work method can be used wherever the purpose of the organization is to develop personality and evolve character.[10]

Current group work theory puts much stress on the need of individuals for group association in order to further their personality development and the utilization of their latent capacities. This, it will be noted, is the psychological aspect of the need for social organization in general. Such association is provided in all cultures through organization along family, educational, and recreational lines, and in various forms of spontaneously organized clubs, as well as through numerous unorganized activities. Many modern conditions, especially in urban industrial communities, militate against the securing of adequate or psychologically beneficial association along recreational lines. Similarly schools, under conditions of crowding and impersonality, tend to lose much of the psychological value that the "little red schoolhouse," for all its shortcomings, had for teacher and pupils. Neighborhood, too, has lost much of its meaning, and even the family frequently does not provide the amount and variety of human association that it once did. It was these among other conditions that led in the middle of the nineteenth century to the formation of the Y's, the Boys' Clubs, and settlement houses, and, later, playgrounds, community centers, and numerous youth organizations, and to reforms in educational and recreational methods.

Group work does more, however, than merely provide opportunities for people to secure association with others outside their family and

[9] Such agencies may, for instance, offer individual instruction in swimming or organize baseball teams or conduct community singing festivals.

[10] Thomas H. Nelson, "Toward Clarifying the Term Group Work," mimeographed statement by the American Association for the Study of Group Work, May 17, 1940.

work relationships. Its emphasis is upon supervised activities and upon professional leadership to the end that the group experience shall be adapted to the peculiar needs of the individual group members. In this it is distinguished from mass measures, such as community festivities or formalized education, that are directed toward interests which large groups have in common. Methods currently advocated for use by group workers stress both psychological understanding of individual members' needs and democratic procedures. Emphasis is put, for instance, upon the need of individuals for acceptance and approval by the leader and the other group members, for opportunities for creative self-expression, for mutual planning as opposed to programs dictated by the leader, for the development of the ability to work cooperatively toward ends democratically agreed upon.

It will be readily seen that group work so conceived has much in common with progressive education. In fact, as a process or method it is a characteristic feature of modern educational work. Similarly, its appropriateness to many recreational activities is clear. This has been recognized professionally by the formation of the National Educational-Recreational Council and by the fact that the recently constituted National Association for the Study of Group Work holds sessions with the Progressive Education Association as well as with the National Conference of Social Work.

Instead of the term "group work" it has been suggested that the term "informal education" be applied to those many activities of leisure-time or "character-building" organizations, such as the Scouts, Y's, and community centers, that are carried on not only for the immediate pleasure of the participants but for the values to be derived from group association. Such activities are usually carried on through clubs, while in classes instruction of a more formal kind is generally offered. Progressive or group work methods may, however, be used in classes as well. They are believed to be particularly suitable for groups composed of children or adults that are organized to discuss social and economic questions and those designed to further the education of parents in matters pertaining to child rearing and parent-child relationships. Leaders of the former kinds of groups often regard their purpose as one of contributing to the skills and understanding essential for responsible participation in democratic society (the group itself being a democratic society in miniature), while the latter expect improved family relationships to follow from the emotionally satisfying experiences that a skillfully directed group situation supplies.

It will be seen, then, that the group work process aims to contribute both to the personality development and to the social adjustment of the group members. One writer sees in it a means of "resolving personal strain through satisfying activities and security of relationships"; another says it gives children "zestful play and a sense of security and belonging with their fellows"; a third calls it "practice in and preparation for democratic living." [11] These are among the aims of progressive education and recreation. If they are shared by social work, it is at least clear that they are not peculiar to it or sufficiently characteristic of it to justify including in the social work category all activities that have such objectives.

Closer study shows that the group work process is used in four different fields: education, recreation, psychotherapy, and social work. With regard to the first two uses, probably enough has already been said to make clear what we mean. The third use—to aid in psychological treatment—is seen in various procedures devised by psychotherapists to treat patients in groups rather than individually.[12] As to the use of group work methods to carry out the social work function, we have already given an illustration in connection with family welfare work and noted that settlement house and other organizations endeavor to give help with difficulties of neighborhood and nationality origin through the formation of discussion groups.

Social group work may also be carried on in institutions for delinquent or emotionally maladjusted children. The ideal of most of these institutions is to provide for the children in their day-to-day living the nearest approximation to satisfying family life, and to that end a "cottage plan" is set up and an attempt made to secure "cottage parents" who will provide the affection and discipline which so many of the children are found to have missed. The activities of these cottage parents would not be a part of social work as we are defining it. A few institutional directors, however, attempt to use the cottage situation in a more controlled manner, putting in charge of the cottages

[11] *The Group*, III (May, 1941), 2–3.

[12] Among these are the use of drama and puppet shows in the treatment of "problem" children and neurotic adults, as described by J. L. Moreno and Lauretta Bender in the psychiatric literature, as well as attempts to adapt the usual psychiatric procedures to work with groups of patients as Paul Schilder describes in *Psychotherapy*, W. W. Norton & Company, New York, 1938. Therapeutic camps for problem children would belong in the same category. See, for instance, Robert A. Young, "A Summer Camp as an Integral Part of a Psychiatric Clinic," *Mental Hygiene*, XXIII (1939), 241–56, and various articles and books by S. R. Slavson.

people who can utilize the little events of daily life and the influence of the cottage group for specific treatment of individual children's social difficulties. Much the same kind of work is carried on in a few summer camps for "problem" children.[13] In its use of leader (counselor, or cottage parent, or whatever name he goes under) and group it would seem that the process here attempted has much in common with social group work under less continuous circumstances.

Social group work is also used to prepare individuals for participation in the activities of normally constituted groups, and so has a particularly important part to play in furthering the work of recreational or leisure-time organizations. Group work of this social treatment type is still in an early stage of development, and its theory and methods are the subject of much dispute. An illustration of this type of group work will be given below (Case 25). Here we would emphasize that in our opinion *social* group work is neither an educational nor a recreational process, but one of the means of furthering the social work function.

Social Work in the Field of Recreation

With the distinction between social group work and certain aspects of recreational activities thus drawn, we are in a position to consider, in more detail than the analysis in Chapter V permitted, the peculiar nature of the social work activities that are carried on in connection with recreational enterprises. Both case work and group work methods are used, the aim of both being to promote children's welfare by helping them to utilize the organized recreational facilities that are provided for that purpose.

Social case work

The place and function of social case work in connection with recreational activities can be stated fairly easily, in spite of the fact that no very specialized body of practice has yet been developed. The oldest form of service in this field is that afforded in numerous kinds of social agencies when clients are helped to make contact with recreational organizations and given an opportunity to talk about the problems that arise in that connection. Family welfare and child placement agencies, for instance, often secure information about clubs and camps for their clients, help to choose the ones that are likely to meet their

[13] See Robert A. Young, *op. cit.*

clients' needs, and discuss with the clients and the recreational workers some of the questions involved. Child guidance and mental hygiene clinics may provide a similar service for their patients as their needs and desires indicate. This putting of clients in touch with suitable recreational resources is, however, no different from the help in using other resources of the community which social workers commonly offer to their clients as the occasion demands. In addition, close attention to the difficulties that clients encounter in their use of these recreational services is not usually given unless the difficulties are definitely related to the problems about which agency and client are working—as, for instance, in that type of child guidance work in which finding suitable recreational opportunities and helping children to use them is considered one of the important methods of indirect therapy. It is only in a rather remote sense, therefore, that these services can be considered case work in the field of recreation.

Another common form of service is that of helping recreational organizations to select some or all of their clientele and to carry on their work with them. A family welfare organization or a settlement house may, for instance, operate its own summer camp, and the job of choosing which children shall attend may be given over to staff case workers. Again, camps or clubs or other organizations offering recreational facilities may receive some of their members through social agencies and carry on their work in co-operation with the agencies. In either case the social workers supply the recreational workers with information about the children and maintain contact between the children and their families during the period of absence from home. Work of this nature assumes particular importance when the providing of recreational opportunities is part of a plan for the children's adjustment to family or community life.

The use of case workers in the field of recreation has much in common with early developments in schools, hospitals, and relief agencies, where social work was first regarded chiefly as an aid to the professional workers in the other field (to teachers, doctors, and administrators) and only indirectly as an aid to the individual pupils or patients themselves. In contrast to this use of case workers, some recreational organizations and others that provide recreational facilities along with other services (camps, settlement houses, child-caring institutions, for example) are beginning to employ case workers to help individual children with the difficulties they encounter in using recreational opportunities. This may involve closely co-ordinated activities on the part

of recreational group workers and case workers; or the case workers may carry on their work rather independently, only giving the group workers information about their findings and consulting with them about the effects of the case work, in much the manner in which a visiting teacher sometimes operates.

An example of joint work is seen in the following episode from a case in which a case worker and a recreational worker on the staff of a settlement house participated.

Case 24 [14]

Frances was irregular in her attendance at the settlement, explaining that she had to help her mother with house work. When she did come, she did not seem to enjoy herself wholeheartedly. There were evidences of rivalry with a younger sister who was as blithe and carefree as Frances was worrisome and tense. Frances upset rehearsals for an evening play by her indecision as to whether she would take part, and finally provoked an open quarrel in which she was severely criticized by the other children. In talking with the case worker, she said she could not come because she must help her mother. When asked for other reasons, it developed that she was afraid to be out at night when boys were on the street since people would think that was not nice. Later, when she definitely refused to be in the play, we heard from another child that she thought it was because Frances was just no good with the men.

There were other evidences of conflict in Frances' feeling about boys in the panic in which she ran from a room which they were passing, in her withdrawal from a game watched by a boy, and her later comment when he left that she felt "queer."

On the assumption that Frances might be helped by some casual association with boys, plans were discussed for a picnic hike with the possibility suggested of asking two or three boys. In talking with Frances alone after she strongly disapproved this plan, the case worker found her fearful. She refused to sit down and, instead, forcibly punctuated her complaints by banging down chairs which she insisted upon putting away. "I hate boys," she said, and then added, "I didn't mean to say that."

The case worker replied that she could say so, as she seemed to be feeling that way about them just then. When Frances said she couldn't explain how she felt, the case worker replied that girls often had feelings about boys which they did not understand and asked if she knew any nice boys. Her expression softened, and she said she had two brothers and a cousin who were nice. She was uncomfortable then and left hurriedly.

[14] Mary Hester and Dorothy Good Thomas, "Case-work and Group-work Co-operation," *Proceedings of the National Conference of Social Work* (1939), pp. 335–36.

The group worker noticed her smiling as she went out. At the next meeting two boys broke in again, and it was interesting to watch Frances first smile at them, and then tell them to leave.

Both workers abandoned the idea of having boys at the picnic since Frances could not accept them at that time, and because mixed groups might be disapproved by her mother. Instead, one of the men students, Mr. B., was asked to come; this was approved by the girls. Frances came, too, although she had declared she wouldn't. On the way, she asked a question of the case worker, who suggested that she call to Mr. B. She did so, and later allowed him to help her across a stream. When he asked for help in gathering branches, she looked up eagerly although she could not ask to go as the other girls did. He included her as if at random, and later reported that Frances always maneuvered so that he would not walk behind her. When songs were begun by Mr. B., Frances sat turned away from him, looked self-conscious and giggled at a popular love song, gradually turned around, and then joined in the singing. Toward the end, she asked him for a song she liked. On the way home, the other girls walking with Mr. B. were joking and laughing, and Frances was noticed struggling with a smile before she made a disapproving remark about them. The case worker suggested that she walk with them, which she started to do, but passed them to join another group ahead. She came back, however, at Mr. B.'s invitation. Several days after the picnic she told the group worker that she had had the best time she had ever had.

In this case both case worker and recreational worker carried out the social work function of helping the child to deal with the problem she encountered in participating in group activities. The group itself was not organized for remedial purposes nor was the carrying on of social work the predominant occupational task of the recreational worker. Nevertheless, the recreational worker had tried to help the child to participate in the group before she called upon the case worker for assistance.

This observation brings to light an interesting point that has not previously been discussed: that social institutions may have social work aspects just as they may have educational or economic aspects without being primarily set up for social work purposes. For instance, teachers in a school or doctors in a hospital give a certain amount of help to their pupils or patients in overcoming the psychological or material difficulties that stand in the way of their getting the most out of the school's or hospital's primary services, and in so doing might be considered to be carrying out a social work function. Similarly, a recreational worker is not concerned only with providing leadership

and guidance to the group as a whole but gives a certain amount of attention to helping individual group members fit into the group and profit from what the group activities as a whole have to offer. In fact, this kind of assistance is a part of each profession's duties to its clients. It is only when such assistance entails too great an expenditure of energy or requires knowledge and skill that lie outside the professional person's competence that the assistance of a social worker is sought.

This point is one of particular importance in recreational group work, for recreational, educational, and social work aspects are often closely intertwined. Groups are often organized in settlement houses and community centers, for instance, in order to meet the recreational needs of children in the neighborhood, to teach the children certain skills and modes of democratic behavior, and to help them to accommodate themselves to the wishes of others and to act in a way that facilitates their getting the most out of group experience. In spite of this plurality of purposes, the provision of such recreational facilities would not be considered social work according to our criteria, for its primary function is not that of helping the individual group members deal with the peculiar difficulties that stand in the way of their using the services of some other social institution.

Social group work

The social work function is served, we have seen above, when social case workers help individual children with the problems they encounter in recreational activities. Attempts in the same direction have recently been made by social—as distinguished from recreational or educational—group workers. Their plan is to organize groups specially designed to meet the needs of children who cannot get along in the usual club or recreational activities. In such groups the activities are adapted to the individual children's interests and psychological characteristics. Children who cannot endure the strain of normal competition, for instance, who react to competitive situations either by excessive fighting or timidity may be protected from such experiences; or all the aggressive children may be grouped together and left to fight it out until they develop their own *modus operandi.* In either case much attention is paid by the group leader to building up an emotionally secure relationship with the children, to developing their sense of self-worth, and to giving their native creative capacities an outlet. As the children's ability to participate in group activities increases, situations more nearly approaching those of the usual recreational

groups are provided, and the children are thus gradually helped to achieve normal group relationships.

The literature on this subject is scanty and not much case material is available. The following case, however, gives some indication of the method of carrying on social group work aimed at helping individual children with the problems they meet in the usual recreational groups.

Case 25 [15]

Ed is twelve years of age, average in size, usually neat in appearance, and in the proper grade at school. His mood changes rapidly from one of quietness to a display of temper that often is quite vicious. His home life is made uncertain by an unemployed drinking father who sometimes beats members of the family when he is under the influence of liquor. The mother struggles under these handicaps to raise a family of five children on relief standards. Almost, it would seem, to offset this insecurity at home, Ed strives to gain security in his group relationships by attempting to dominate, causing many discipline problems from that drive. As a result, he is not a very popular member, has few close friends, and is more tolerated than accepted by the groups. A study of his reactions in three different groups sheds light on some of the factors involved in the adjustment of such an individual.

The first was a shop group, where the organization permitted Ed to be rather free as an individual without the demands of too complete group adjustment. As a result, his attempts to dominate were at a minimum, as he was interested in his own work, and if the tools he wanted were available he was not too disrupting. Although he did not hesitate to seize any tool he wanted, regardless of who had it, when these incidents were handled he had to take others into consideration, and a beginning was made in his adjustment experiences. His interest span varied with the activity, and when interest lagged he often amused himself by disturbing others; but for the most part he centered in his own work. The activity of this group met his interests and needs, and when he felt so inclined he more or less ignored the rest.

In the second experience a group of boys organized a cowboy club in preparation for a special event sponsored by the group agency. More unity was necessary here, and Ed found that more concession to the group was essential. He took much initiative in the formation of the group, and be-

[15] Merrill Conover, "Use of Group Records of Local Agency," *Proceedings of the National Conference of Social Work* (1938), pp. 393–97.

cause of his interests, past experience, and personality, he assumed the role of captain. The members did not object, as he really did feel much responsibility for the group, but that role carried additional problems for him. Two boys about his own age were individualists in their own right and had minds of their own so were not in the mood to take very many orders from Ed. He met this situation by appointing one boy his first lieutenant and the other his second lieutenant, having one of them seated at his right side as he presided over the meetings. If both his lieutenants disagreed with him he allowed himself to be overruled. Dissension in the ranks might mean a breakup of the group, and in this instance it was the group itself which was meeting the needs of Ed as an individual. This situation automatically set up an experience that demanded a greater sense of social responsibility than Ed was accustomed to observe, but he had been one of the initiators of the group and had to bow to these self-imposed relationships. Not that there were no struggles, but it was another step in his social education—all within a normal group relationship.

Our third group was presenting a shadow play. Ed could go into the shop group and carry on his own activity whether it was what the others were doing or not, and he had been one of the originators of the cowboy club, but he was entering this group after it had been started and someone else had planned the program. He proceeded immediately to make himself useful to the group on the basis of their interests and plans, assisting in construction work, reading in dialect, and, in general, making himself acceptable to them. This went on for a period of some five weeks before he reverted to his all too frequent behavior. In one evening he turned from an attitude of protection to one of possession and attempted to dominate the assignment of roles by bringing in two of his friends and overlooking some of the regular members. Being thwarted in this by the group, he flew into a rage, later in the evening, out of all proportion to the provocation and tried in a very vicious manner to kick out two boys who had merely wandered in and asked if they could play a game with them.

The project was a real group experience in that all plans, selection of play, acceptance of handiwork, and assignment of duties and roles were on a group-decision basis in an informal spontaneous atmosphere. Ed felt a certain security and enjoyment in the group that seemed to be jeopardized by new members or plans he could not introduce or control. He seemed caught between a desire to control absolutely and to follow group planning, and he would give up going home to hear his favorite radio program at one minute and threaten the whole project the next. Group adjustment was a deep struggle for him.

As the time to present the play drew near, personal disputes were more and more placed in the background in favor of the group, Ed agree-

ing to one of his personal enemies taking a part left open the night before the play was to be given. The first experience was very gratifying to the audience and the players, who immediately embarked upon a second similar adventure. Again the important evening arrived, and for the second time Ed earnestly desired that his mother see the play, but the drunken father could not care for the baby. Hurrying back to the Center only a minute or two before curtain time, his second discouragement was climaxed by a shift in the audience. He had expected to give the play for the mothers' club, but it was raining, and that group was so small that some younger clubs were invited in to enjoy the performance. Ed's "artistic temperament" was keyed for an adult audience; the lights were out, the audience assembled, and the curtain ready to be pulled, when he announced he would not perform for the young group, and to make his decision more effective he hit one of the players because he walked in front of him. Ed was playing one of the lead parts and felt the group could not get along without him. The leader said, "Either get in the play or out of the room," told the stage manager to pull the curtain, and held his breath. Ed picked up his character, sat down behind the screen, and went to work without another word. That experience had real meaning for him. To deliberately stand in front of the group and throw out his challenge, be made to face the responsibility for his decision, and bow to the group within a space of two minutes was a startling experience.

Commenting on the work in this case the writer says, "Here was an individual moving from a rather loosely organized group to one demanding intense cooperation. We see him meeting the demands at one minute and being unable to do so the next; making progress and then slipping; feeling secure and then being challenged; moving out into the group and then withdrawing into himself. Always finding adequate reasons for his own misconduct in someone else's actions, he never faced the responsibility for his deeds, but when the pulling of the curtain left him face to face with his threat, he chose to remain with the group. Each club with its different situations and interplay of personalities added to his education in the give and take of group experience, but without a leader with the ability to turn these incidents into learning situations, either the group would have rejected the child or he would have dominated the group, but opportunity for adjustment would have remained at a minimum."

Such work, in our opinion, is social work rather than either education or recreation, for its aim is to enable the individual to participate in the activities of organized groups, and it achieves that aim by meth-

ods that take into account the peculiar nature of the individual's difficulties.

Suggestions for Further Study

Conover, Merrill, "Use of Group Records of Local Agency," *Proceedings of the National Conference of Social Work* (1938), pp. 392–400.
Description of social group work and how it was carried on in one case.

Everett, Edith, "Social Work in the School," *Visiting Teachers' Bulletin,* Vol. XVI (December, 1940).
One of the few descriptions of visiting teacher work that show clearly the application of modern case work theory.

Everett, Edith, and a Committee of the American Association of Visiting Teachers, *Visiting Teacher Service Today,* Multigraphed pamphlet, 1940.
Shows how the work is carried on in several cities and describes administrative relationships and training standards.

Fink, Arthur E., *The Field of Social Work,* Henry Holt and Company, 1942, pp. 180–93, 198–212.
Description of procedure in visiting teacher work and an interesting case illustration.

Oppenheimer, J. J., *The Visiting Teacher Movement,* Commonwealth Fund, New York, 1925.
A history of the origin and early development of this aspect of social work.

Ryan, Carson, *Mental Health through Education,* Commonwealth Fund, New York, 1939.
An educator's view of the need for mental hygiene in the schoolroom.

Sayles, Mary B., *The Problem Child in School,* Commonwealth Fund, New York, 1929.
Cases illustrating some of the reasons why children have difficulty in making use of school opportunities and some of the kinds of help visiting teachers afford.

Slavson, S. R., *Character Education in a Democracy,* Association Press, New York, 1939.
Attempts to "outline a practice and a point of view by means of which all aspects of the human personality are called into unitary function through apppropriate educative situations." This is a theoret-

ical exposition of the many factors that enter into personality development and how knowledge of them can be utilized for the educational process. The book is primarily concerned with education rather than social work, but it is valuable in indicating the kind of factors and concepts group workers in all fields deal with. One chapter is devoted to what the author calls corrective efforts—those we would consider group therapy or social group work.

Smalley, Ruth, "Interview with a Child," *The Family,* XIII (1932), 266–70.
An interesting case but one that shows visiting teacher work in the period in which it was not clearly differentiated from child guidance.

Smalley, Ruth, "Social Case Work Techniques in Attendance Service," *Visiting Teachers' Bulletin,* XVI (June, 1941), 6–15.

White House Conference, 1930, *General Report,* pp. 179f.

Young, Robert A., "A Summer Camp as an Integral Part of a Psychiatric Clinic," *Mental Hygiene,* XXIII (1939), 241–56.
A description, in considerable detail, of how a camp program was utilized to help some "problem children" to overcome their difficulties in social relationships. Much of what is said is equally applicable to child-caring institutions.

See, also, reading suggestions, Chapter II, "Group Work."

Chapter XV

SOCIAL WORK IN THE FIELD OF CHILD WELFARE: COURTS AND CORRECTIONAL INSTITUTIONS

The analysis in the foregoing chapters has made it clear that the welfare of children is promoted by social work through the help it affords children in making use of certain social institutions. Social work, according to our analysis of its nature, does not duplicate existing institutions or provide substitutes for them (as would be the case were child-caring institutions and educational and recreational programs for the "underprivileged" classified as a part of social work); instead, it facilitates their use by the individuals for whom they were designed. This point is of particular importance when the role of social work with respect to children who are delinquent or likely to become delinquent is under consideration, for it is customary nowadays to regard all activities directed toward such children as being in the field of child welfare and hence, in the opinion of many, a part of social work.

The Nature of Social Work with Delinquents

We have earlier shown why we do not consider all child welfare activities social work. Our position can be summarized by saying that although social work deals with individuals, it deals with them in regard to their relationships to social institutions. The question, then, is what institutional relationship is involved when social work in regard to delinquency is carried on.

It is clearly not satisfactory to group together for separate consideration all social work activities in which delinquents are clients, for there are delinquent children among the clients of family welfare workers; visiting teachers know many of them; child guidance workers recognize them as one particular category of patients. The activities that these social workers carry on with delinquents, however,

usually vary with the agencies by which the workers are employed. Family welfare workers, we have seen, are inclined to emphasize the problems that interfere with the adequate functioning of families; visiting teachers are tending to confine their activities to the adjustment of school difficulties, while child guidance workers—it will be shown later—restrict their services to children who are emotionally maladjusted. All of these specialized services may be needed by certain delinquent children, but when such children become the clients of these agencies they are not earmarked for special consideration because of their behavior.

There are, however, some social agencies whose work is specifically directed toward helping children overcome the difficulties they find in abiding by the rules of community life. In addition, help of this sort is afforded through social work that is carried on by probation officers and by social case workers and social group workers in training schools and correctional institutions. It would appear justifiable, therefore, to consider these activities a special field of social work in child welfare, co-ordinate with those described in the preceding two chapters, for their objective is to enable delinquent children to comply willingly with the rules of conduct prescribed for all who are members of the community.

It should be noted, however, that not all organized activities that have that objective among their goals are to be regarded as social work. The family, the school, the church, some recreational and informal educational organizations, even courts and police share in the work of securing the social conformity of children. The unique contribution of social work, as has been repeatedly pointed out, lies in its attempt to deal with the difficulties peculiar to each individual client that handicap him in his endeavor to co-operate in some particular form of group life.

Another logical difficulty met with when social work in regard to delinquency is under consideration is that delinquency is a legal term and has never been quite satisfactory to social workers as a means of identifying a certain class of clients, for they and others who work closely with children are well aware that behavior that brings one child to the attention of legal authorities and results in his being pronounced a delinquent occasions the referral of another to a mental hygiene clinic, while in a third case the behavior may go unnoticed or even be approved of as an evidence of juvenile initiative and high spirits.

Social workers know, too, that social and economic factors are very important in determining how a given case of misconduct will be handled. Even though they display the same kind of antisocial behavior, children from well-to-do families are much less likely to come to the attention of police and courts than are those whose parents are poor. Similarly, religious and national groups vary in their attitudes toward resort to the law. Jewish social welfare organizations, for instance, reflect Jewish culture in general in the efforts they expend and the facilities they provide for keeping children out of contact with courts, while Italian and Polish parents are relatively prone to use the court's facilities for settling domestic difficulties, including those of child discipline and management.[1]

Recognizing this situation, social workers in child welfare have been inclined to group together all children who are in need of assistance because their behavior is considered socially undesirable, whether or not they have legally been pronounced delinquent. In addition, they usually put neglected children in the same category, their observations having led them to conclude that parental neglect frequently leads to antisocial behavior on the part of the children. In their services to these children social workers are not concerned with protecting the safety, property, or comfort of other members of the community, or with deterring other children from committing similar offenses, for these are among the functions of legal institutions. Rather, they seek to give assistance to children in their efforts to abide by the rules of social conduct that are traditionally or legally formulated to govern their behavior as members of a community.

Among these rules are those that set limits on how children shall eat, dress, and carry on sexual and excretory activities, that regulate the amount of property damage or bodily harm they may inflict, that prescribe how they shall conduct themselves in relation to the adults who are in authority over them. Not all of these rules are specifically defined in the law. Their embodiment in custom is attested to by the fact that children may be judged incorrigible or wayward without having committed specific acts that are legally forbidden. Some of the rules refer to behavior in the family group, some to school conduct, some to relations to other individuals and their property, but all are referable to the fact of co-residence and the rights and duties that social

[1] For a detailed analysis of the influence of these and other factors on delinquency rates, see Sophia Moses Robison, *Can Delinquency Be Measured?* Columbia University Press, New York, 1936.

organization on that basis entails. Social work in this sphere, therefore, is again concerned with helping individuals to play their appropriate roles in an organized social group; and whether or not these difficulties have resulted in court conviction is to social workers not the point of chief concern.

Causes of Delinquency

As background for a discussion of social work in this field one must have at least a passing acquaintance with the theories of the causes of the behavior that may bring children to the attention of the courts, for many of the methods employed for the prevention of delinquency are based upon oversimplified assumptions about its nature. From the point of view of social institutions, delinquency represents the inability or unwillingness of an individual to abide by certain of the rules of behavior prescribed by law—or an ignorance of these rules or of their importance. Behind that are causes—psychological, economic, social, cultural—that often have to be taken into consideration when dealing with the problem on either a mass or an individual basis. Of course the same can be said of other kinds of difficulties that individuals encounter in organized group relationships—in the family, in school, in industry, and so on; but programs for the prevention of such difficulties do not arouse so much public interest nor is there so much confusion as to the relation of social work to them. The following résumé of some of the factors involved in juvenile delinquency may, however, throw light on the nature of other forms of social maladjustment as well, such as those displayed by some children who do not get along well in school or in recreational groups and by some adults who find family life or co-operation on a job difficult.

Basic to an understanding of the causes of juvenile delinquency is the theory of how children in general come to accept the restraints that group life imposes upon everybody. There are two ways of looking at that question—the collective and the psychological. The first shows the external means by which the restraints are imposed and the nature of the restraints themselves. The second shows the internal processes, the ways by which self-control is developed so that the need for external compulsions is lessened. Neither of these sets of theories can be developed adequately here, but it may serve our purpose to note the points of chief importance.

Cultural aspects of delinquency

On the collective (or sociological or cultural) side it must again be emphasized that the group and the individual are not entities in opposition to each other, the former being the bearer of culture and the latter its unhappy recipient. Rather, all individuals are members of numerous groups, and the groups themselves come into being in response to biological needs and other needs derived from them, as has been shown in an earlier chapter.[2] Culture itself is the sum total of man-made devices for satisfying these needs and includes not only material equipment and goods but language, values, customs, laws, and group activities as well. All human behavior is culturally determined, and not even our simplest or most primitive acts are spontaneous responses to physiological stimuli.

It is incorrect, therefore, to maintain—as is sometimes done—that delinquency is a reaction against the restraints of culture *per se*. It may appear to be so under certain conditions of psychopathology, but even then the casual relationship is more complex. By and large, however, the cultural explanation of delinquency is to be found in the conflicting values within and among various cultural groups and in the fact that individuals belong not to one group alone but to many.

Cultural conflict is a situation often described by sociologists, some of whom are inclined to limit the term to the divergencies between American and foreign ways of life, as found especially in segregated sections of large cities. It is an old story that native-born children of foreign-born parents find difficulty in reconciling what they are taught at home and at school or on the street, often become ashamed of their parents and their foreign ways, and in their attempt to be American may take on the less desirable features of contemporary life. Doubtless this frequently does happen, but it is a phenomenon not restricted to immigrants and their children. The broader fact which this explanation somewhat obscures is that complex, modern civilization—even within the boundaries of one town or city—consists not of one culture, one set of values and customs, but of many. This is particularly true in the United States, not only because numerous national groups live here but because the relatively flexible, non-stratified social system fosters economic ambition and does not define clearly the rights and duties of social classes. There is conflict between

[2] See Chapter IV.

cultures and conflict within cultures; and both may be influential factors in any given individual's behavior.

Take first the question of divergencies in customs and standards among groups within the population. This is a relatively unexplored field, but enough is known to indicate clearly that differences are much greater than might at first be thought. It is well known, for instance, that the sexual standards of certain groups of people are different from those embodied in law. Similarly, there are submarginal economic groups in which certain kinds of stealing are regarded as normal means of getting a livelihood. (Nor must it be overlooked that stealing on a larger scale, frequently with legal assistance, is not unknown in higher economic circles.) Among certain small-scale business groups cheating in weights and measures is taken for granted, even as gambling, prostitution, illegal manufacture and sale of liquor, and selling and buying "protection" characterize the accepted modes of life of other groups. Of the same nature are the activities of the boys' gangs in which playing truant from school, stealing automobiles, damaging property, riding freight trains, and the like, are modes of behavior to which all members are supposed to conform. It is not that most of the people who engage in these activities do not know that they are legally forbidden. To many of them the law and their personal and group ethics are in conflict, and being caught by the police is a misfortune but not a disgrace.

It is important to realize that these groups do not disagree with the total scheme of dominant American values. In fact, in many ways they are strict conformists and are shocked at lapses which they see in the behavior of other groups. Their lack, in other words, is not that of conscience but of adherence to certain tenets of the legalized scheme of values and customs. Nor should this description be taken to mean that all behavior of the types here described is due to divergencies among cultural groups. The point we would make is that delinquency may be due to such causes and, more important, if such is its origin, the modes of reformation must be adapted to take this into account.

In addition to this antagonism between the standards of various groups in a community, there is a possibility of conflict among the values within the predominating culture itself. Karen Horney, a psychoanalyst, has pointed this out and given a few examples,[8]

[8] Karen Horney, *The Neurotic Personality of Our Time*, W. W. Norton & Company, New York, 1937.

although the problem is primarily a sociological one and has not yet been adequately explored. The most frequently discussed issue is that of humanitarianism versus individual achievement. Dr. Horney shows that children are taught, on one hand, to be kind to others and regardful of their feelings while, on the other, they are urged to excel in all manner of competitive activities. Praise and rewards go to the winners, sometimes without much regard for how they won. In the normal process of psychological development most children achieve a balance between these conflicting demands, especially if they have the intellectual and economic equipment to be successful and to have pleasure in at least some areas of activity. If, however, they are thwarted on all sides, if no compensations are offered for relinquishing what they are told by movies and stories, if not by parents and teachers, are their rights, then some of the brightest and most virile, as well as some of the dullest, may take the legally forbidden routes to that personal success which the culture rates so highly.

It is clear that the problems involved in helping such children are different from those set by the previous group. Offhand one would say that they consist of helping these children to find ways of achievement and satisfaction that do not infringe upon the rights of others. But this is much more easily said than done—especially when the legally forbidden pleasures are so exciting and fruitful. In addition, there is more to be taken into account than the overt fact of lack of satisfaction. It is beyond the scope of this book to go into all of these questions. We would note here, however, that the problems presented to social workers by children who become delinquent because of inability to reconcile conflicting values within the culture are different from the problems presented by children whose values are in conflict with the law.

How children acquire a culture's standards

So much for the question of culture as an influence making for juvenile delinquency. The next question is how children acquire these cultural standards. The answer—from the sociological standpoint—is simple: they learn them slowly, day by day, through directions and implication, from parents, teachers, and companions, and through books, movies, radio, pictures—all the means by which ideas and ideals are passed along.

In this process the family is the primary socializing agency. Instruction there begins at birth; and even the most neglectful parents

teach much, and the most recalcitrant children learn much, about the ways of life in the community and nation in which they live. It is obvious, however, that in so far as family life is disorganized, the parents neglectful, careless, disinterested, or occupied with other matters, the children's instruction will suffer. More important, perhaps, is the fact that without the satisfactions which emotionally comfortable family life affords, children may find their chief source of values in their own age groups of similarly neglected boys and girls. These groups have a culture of their own, also transmitted from generation to generation; but the generations are of smaller age span than those of family life and their ideals are more labile, ephemeral, not subject to the test of life-long experience nor deeply rooted in the ethics of the total civilization.

In this connection it is noteworthy that it is the quality rather than the mere presence or absence of family life that is important. Sociologists at one time put great stress upon "broken homes" as a cause of delinquency, but carefully controlled studies have indicated that divorce, separation, and death are not valid indices of the breakdown of parental hold on children which so often precedes delinquency.[4] The quality of family life as a factor promoting delinquency is important in several ways. There is, first of all, that kind of family in which children are loved and trained but the training is in some respects not in keeping with the ethics of the majority of the community. An example is seen in a recently told story of a father who met his son in a police court line-up. He dashed out of line to greet the boy, took him affectionately by the shoulder, and said that they were now real pals and he'd see him in jail. Such children are probably particularly difficult to reform, since many of them have little basis for dissatisfaction with their ways of life.

Another kind of family is that in which there is absence of control —parents busy, immature, preoccupied, neglectful, careless, or more or less disinterested. Not all children in this situation (or any other) become delinquents, of course; but this kind of family life does make it easier for children to seek from outside sources the values by which to guide their conduct. If, in this process, they find them among antisocial groups and take to delinquency, those who would retrain them must take into account the quality of the emotional relationships

[4] Clifford Shaw, "Social Factors in Juvenile Delinquency," *Report on the Causes of Crime*, National Commission on Law Observation and Enforcement, Washington, D. C., 1931, II, 276.

that existed in the family, for on these probably depend the children's ability to be influenced by normal family standards.

The third general type of family which is likely to transmit the prevailing standards poorly is the one in which there is a disturbance of the relationships which normally exist between parents and children. Such disturbances are of various kinds (ranging from excessive protection and control on the part of parents to overt dislike or neglect), and the implications for the retraining of children who become delinquent vary accordingly.

Psychological aspects of delinquency

The explanation of why adverse emotional situations may interfere with children's ability to accept the standards of their parents is found in psychological rather than sociological theory. Psychologists are in agreement with cultural sociologists that children are not born with a sense of moral values but acquire them through association with other people. They also agree that values become an actual part of the personality and so are not wholly dependent upon external sanctions. To these theories they add those that account for the process by which children make the teachings of their cultural group a part of themselves, and they describe the situations that may adversely affect that process.

There are, of course, several schools of opinion on this subject among psychologists. Psychologists with physiological leanings, for instance, would probably stress conditioned reflexes as basic, while followers of Otto Rank would pay chief attention to growth processes and the child's striving to achieve his separate individuality while at the same time retaining the advantages of group life. Freudian theory, on the other hand, emphasizes the child's emotional dependency upon his parents, and shows explicitly why their behavior and attitudes toward him are the most important elements in the environment in which his basic adjustments are worked out. In spite of their differences, there seems to be common core of agreement among these investigators, which may be stated somewhat as follows.[5]

From birth children find pleasure in the satisfaction of their desires and feel angry when they are thwarted. Frustrating situations, however, arise almost from the start—infants cannot have food at exactly the moment at which they want it, and slightly older children

[5] Part of the following theory, especially that having to do with the phantasy life of infants, would not be accepted by all psychologists.

have to learn to control their excretory processes, to refrain from tasting, touching, smelling many things, to share their toys, and so on. The precepts of the culture in which children are to live intrude themselves from the very beginning, and the basis of the ability to accept these limitations on activity and to utilize them for personal development is early laid. In addition to feeling angry and aggressive about being kept from having or doing what they want, even very young children feel fearful and insecure in such situations—perhaps because they sense their dependency upon their parents' good will, perhaps because they fear the parents will feel as angry as they do and punish them. It may be too that this attempt to assert their own wills and to be aggressive—that is, to be independent of their parents in some small way—is in itself a rather terrifying experience.

However that may be, it is held that little children submit at first not so much to their parents' actual commands as to their own phantasies of what will happen to them if they do not obey. This gives them a breathing space, as it were, a calmer period in which to observe more accurately what the parents' attitudes toward their behavior really are. If this observation shows that the parents are kind instead of hostile, and yet firm in the limitations they set, the children gradually become relieved of their apprehension, their anger becomes less disruptive, and they find it possible to modify their conduct along culturally acceptable lines. Soon, in their affection, they try to be like their parents, and in this way make the parents' standards of behavior a part of themselves.

If, on the other hand, children find, time after time, that the parents are really almost as angry as their own phantasies about them had at first suggested, their fears, anger, anxiety—the whole complex of confused feelings that the frustrating experience had aroused—are reinforced. In this uncomfortable emotional state it is impossible for children to learn to reason clearly and to understand what is expected of them and why. Some will submit quickly to their parents' orders and withdraw into some kind of phantasy world of their own. Others will fight. Many will show both kinds of reactions and be even more upset—especially as the parents will probably not be consistently antagonistic but will mingle affection with anger and so confuse them still further. Few, however, will develop that kind of strength and ability to be themselves which apparently results when they find that rules of conduct are not expressions of humanity's hostility toward them.

According to this theory, then, the original basis for control of behavior is phantasy and its accompanying emotions of fear and insecurity. These yield to reason and knowledge only as the child finds love and kindliness accompanying the necessary limitations that are set upon his desires. Whether this explanation is strictly correct chronologically is perhaps not very important. What is important is the observation that children cannot accept and incorporate society's rules and follow them rationally unless they feel secure in the affection of those with whom they live. Lacking this assurance, they are torn by conflicting emotions—suspicious of people's intentions, angry at having to obey rules, fearful of the consequences if they give vent to their real feelings, fighting, withdrawing, or otherwise irrationally reacting to both real and fancied demands. If they are deprived of affection from the very start, it may be that they will not be able to develop consistent self-control at all but will acquire what psychiatrists call psychopathic personalities.

This is the extreme case, of course, but even less unfavorable attitudes on the part of parents may have adverse consequences. Over-indulgence, domination, too great solicitude and protectiveness may be as disastrous as lack of affection, especially if they are accompanied by general friction and unhappiness in the family. It might be thought that a spoiled child is spared some of the anxiety-producing experiences that children usually meet. But the theory has it that there are benefits as well as hazards in such experiences. When not too beset by fear, a child can use frustrating situations to advance his awareness of his separateness from the rest of the world, to scatter his feelings of love and hate among various persons and objects, and thus to further the process of disentangling his emotions about his parents from the rules of conduct which they try to impress upon him. Consequently, if he is too much shielded, he is handicapped in the growth of both his relationships with other people and his knowledge and control of himself.

There is, of course, much more that the "dynamic" psychologists have to say about the way a child's personality normally develops and the way he makes the customs of society a part of himself. Much attention is paid to the child's attempts to be like his parents and also to his growing sense of difference, and to the part which the parents' healthy balance of affection and discipline play in making this a constructive experience, so that the child takes on their ideals and ways of life without undue anxiety and resentment. Under such

conditions the child does not become a duplicate of his parents (as overpossessive parents would like him to be), but he achieves a sense of his own individuality because he is free from fear and able to accept or reject his parents' standards and work out his own pattern of life on a rational basis.

Implications for treatment of delinquents

The exact relationship between the various types of unfavorable personality development and delinquency cannot be summarily described, but perhaps enough has been said to indicate the main lines of connection. We have earlier suggested that delinquency is a refusal to conform to those customs of society that are sanctioned by law, while we have here indicated that customs cannot be taken over from parents and made a constructive part of a child's personality if the emotional conditions for their transmission are not favorable. This is not to say that all rejected, spoiled, or inconsistently handled children are overt rebels against society. Some may find sources of strength and security outside their homes. (In this, of course, lies the hope of using teachers, ministers, recreation leaders, foster parents, and others as aides in a retraining program.) Many will express their emotional conflicts in ways that are not legally forbidden.

The important fact for those who are working with delinquents is that delinquency may represent a child's emotional inability to accept society's rules, his lack of capacity to guide his conduct rationally, and that these conditions, in turn, are often the consequence of the child's unfavorable relationships with his parents. The task of rehabilitation in such cases varies with the nature and severity of the parent-child maladjustment, but it is clear that further punishment cannot be the answer (for such children are overfearful to start with), nor will instruction in how to behave suffice, for such children's difficulties are not the result of ignorance. Somehow or other, if these children are to gain the kind of control over their behavior that is satisfying to both themselves and society, treatment must be related to the causes of their difficulty, and their basic fears and insecurities must be relieved.

In this brief survey of the causes of delinquency little attention has been paid to those factors which, though often important, appear to us to be secondary and supplementary to the basic ones associated with the transmission of culture and its incorporation into the personality. Under this heading could be listed poverty, adverse school

conditions, lack of proper recreational facilities, poor health and handicapping physical conditions, lack of adequate intelligence. To call these secondary may seem unwarranted, since so many delinquents do suffer from these handicaps. Certainly poverty may create or enhance family friction, bring about the situation in which parents do not have time or energy to supervise their children properly, necessitate the privations which are not in accord with the scheme of values which children see portrayed in movies and magazines, and so on. Schools, ill equipped to meet the intellectual and emotional needs of all children, may provide unnecessarily thwarting experiences for some, from which they may seek to escape by persistent misconduct and truancy. Similarly, poor health, physical disabilities, low intelligence may put a child in an unfavorable competitive condition, and he may search for compensation in delinquent acts. It seems doubtful, however, that these conditions, in and of themselves, produce the kind of persistent, deep-rooted delinquency that arouses the public's chief concern and leads to programs for delinquency prevention and the provision of social work services in this field.

Types of Social Work Services

To return to our original question, we must next sort out from the various measures undertaken to cope with problems of delinquency those that belong to social work. The criteria for judging whether activities should be classified as social work are (1) that they are individualized on the basis of difficulties encountered in some social relationship, and (2) that they are directed toward helping an individual to play his part in a social institution or to make use of its services.[6] Both of these criteria must be met if activities aimed at delinquency prevention are to be considered social work.

Tested by these criteria, several types of work with delinquents or "predelinquents"—children whose behavior suggests that they are likely to run afoul of the law—are not social work. There is, for instance, the psychiatric and psychological treatment afforded delinquents, among others, in child guidance clinics. It has been shown above that delinquency may be symptomatic of general personality maladjustment, that it may represent a child's more or less irrational

[6] This help may, of course, be indirect—as when community resources are organized to achieve this end or when research concerning it is carried on—but the primary function of the activities must be that of the resolution of individuals' difficulties in specific social relationships.

attempt to find satisfaction for inner strivings of which he may not be clearly aware. Not all delinquents whose behavior has such a basis need, want, or can make use of psychiatric treatment, but if such treatment is instituted it will not be confined to or necessarily center around the delinquent acts and the social factors related to them. It will, instead, aim at general personality adjustment, either through direct treatment of emotional difficulties or through the building up of compensatory devices that may enable the individual to operate in a more socially acceptable manner. Without going further into the question of what is involved in psychiatric treatment, it will be seen that, although it is highly individualized, psychiatric treatment of delinquents is not a part of organized social work because it is not limited to helping children meet the difficulties that stand in the way of their participating in particular social relationships.

This is not to say that psychiatrists do not have important contributions to make toward social work with delinquents. Their diagnostic skill may be needed in planning social work efforts; their assistance may be required in understanding the meaning of individual delinquents' response to social treatment. When employed in this way psychiatrists play the same kind of part in a social agency's work as do other specialists—psychologists, home economists, physicians, and so on—but their own activities do not thereby become those of social work.

Application of the criteria of social work to the work of organizations offering recreational and informal educational opportunities and various reconstructive measures in delinquency areas reveals that these, too, are not social work. The measures that such organizations or programs use in the hope of lessening delinquency are numerous. They include, first, large-scale activities that are neither individualized around problems of delinquency nor specifically related to the promotion of law-abiding behavior. Under this heading may be grouped, as examples, the enlargement of recreational facilities in areas in which delinquency is frequent, the promotion of athletics by the police or other bodies interested in delinquency prevention, the maintenance of day and residential camps for children who live in crowded areas. Second, and further afield, are the broadly preventive efforts of organizations interested in slum clearance, improvement of public health conditions, development of civic pride through festivals and other congregate efforts, and so on.

Third, there are programs that are specifically directed toward

delinquency prevention but that assume one or another cause of delinquency to be generally operating and that base their efforts upon it, without paying attention to the needs of individual delinquents. Among activities of this type are the attempts at eliminating "cellar clubs" by providing meeting places and supervision for spontaneously organized groups of delinquents and near-delinquents; the provision of library facilities and reading lists so that delinquents may better participate in the cultural heritage; the setting up of classes in "citizenship training" in which delinquents are taught to be law-abiding.

In pointing out that they are not social work, we do not in the least intend to decry these efforts. Much in the way of delinquency prevention can be accomplished through them, since they supply children with the goods and services, the lack of which may lead to delinquent behavior. Close examination of the chief function of these activities will show, however, that they are a part of organized recreation or education and that they do not provide for the adjustment to another social institution in that individualized manner that characterizes social work.

In spite of these limitations to the concept of social work, various agencies do provide social work services aimed at helping not only delinquents but other children whose behavior is considered antisocial to become law-abiding. Both case work and group work methods are used. First, work of this nature is carried on by some protective agencies, such as "girls' service leagues" and "juvenile protective associations," by some family welfare agencies, by child guidance organizations in which social rather than psychiatric treatment is carried on, by rural child welfare agencies and by other organizations that are not part of the legal system. Second, case work with children judged delinquent is sometimes carried on by probation and parole officers in connection with other duties. Third, training schools and correctional institutions may either provide social work services or may conduct their whole program as social work.

In view of the complicated character of the causes of delinquency it is not to be expected that any one approach will achieve a very high proportion of favorable results. Some delinquents need psychiatric treatment. Many are unlikely to become or remain law-abiding unless widespread improvements are made in the educational and recreational opportunities available to them, their family life becomes more satisfying in both economic and affectional aspects, or changes are effected in the scheme of values by which large groups of the population, urban

and rural, live. Others (and some of these as well) can probably be helped by having an opportunity to consider with a professional person what they can do about their difficulties, to secure assistance in their personal efforts or to participate in group experiences designed to foster social co-operation. This situation is, of course, not peculiar to delinquents. The causes of social maladjustment of all sorts are equally complicated. It has seemed worth while, however, to describe the delinquency situation in some detail because it is fairly typical of various forms of social maladjustment and because it throws into high-light the role of social work in relation to other social institutions.

Social Work with Delinquents and "Predelinquents" under Other than Legal Auspices

As has been said above, social work with delinquents and with children displaying behavior that may later bring them into conflict with the law is carried on by various kinds of social agencies. Children judged delinquent by juvenile courts may be given into the care of family welfare societies, child placement agencies, rural child welfare or visiting teacher organizations, or other types of social agencies. To some extent the selection of an agency is based upon the supposed needs of the individual child. This would necessarily be the case, for example, when the help of a child placement agency is requested by a court. Frequently, however, agencies do not strictly limit their intake to cases involving difficulties in one or another particular area of social life (family agencies in small cities, in particular, are prone to offer service to any socially maladjusted person regardless of the chief area of his problems), so that there may not be this close correspondence between the usual services of an agency and the need of a delinquent child for help with the difficulties that precipitated his illegal behavior.

There are, however, certain types of agencies or divisions within agencies that are specially set up for social work with children who are delinquent or in danger of becoming so. The Girls' Service Leagues do some work of this nature with adolescent girls. Juvenile Protective Associations and Societies for the Prevention of Cruelty to Children frequently provide for such case work service. Big Brother and Big Sister organizations are beginning to engage in professional social work, although most of them still use volunteers and provide a less specialized form of assistance to the children in their care. In rural areas the federal plan for the development of child welfare services

specifically designates "children in danger of becoming delinquent" as one of the groups for whose assistance the federal subsidy is to be expended.

Social case work

A survey of the social case work activities carried on under these various auspices would involve us in too much detail, but before a description of the work of one particular type of agency is given, it must be pointed out that the same dichotomy in method that runs throughout the rest of social case work is found in this field as well. This is the division of opinion and practice that ranges on one side case workers who conceive their task chiefly as one of diagnosing the nature of a client's difficulties and setting in motion plans for their elimination and, on the other side, those who are chiefly concerned with engaging the individual in the solution of his problems. Both groups do a good deal of work with families, teachers, recreational workers, and others in order to help their clients to become law-abiding. The one group, however, would keep the planning about how to meet the client's problems largely in their own hands and would take into consideration all aspects of the delinquent's life. The other group would give more attention to the difficulties as the client himself sees them and would do more work *with* the child and less *about* him. These latter social workers would not think it necessary that all aspects of a delinquent's life be set straight (that his personality problems be resolved, his health needs attended to, his school and recreational difficulties met) before he could be expected to become a co-operative member of the community. Rather, they would concentrate their efforts on discovering why it was that he found conforming to legal requirements so difficult and would attempt to give him assistance in dealing with those problems.

The following case is cited in illustration of the kind of social case work that aims to help delinquents to find their way to abiding by the community's laws. The agency was one that includes among its numerous facilities a training school for delinquents and other socially maladjusted children. Some children are committed to the school by a court; others come at their parents' or guardians' request. On parole from the school most children are assigned to case workers from the agency's child guidance staff or otherwise kept under the agency's supervision. The boy in this particular case was placed in a

residential clubhouse that the agency maintains and was supervised by one of its case workers.

Case 26 [7]

George, age 18, was a boy who had had an unfortunate family life. His mother had been committed to a mental hospital when he was nine years old, and his father shortly afterward received a prison sentence. George spent most of the rest of his childhood in an orphan asylum and in several foster homes. His adjustment in the homes was said to be satisfactory and his school work fair, but he became involved in several thefts and was finally taken into court for burglarizing a store in company with another boy. He was committed to a training school maintained by a private social agency. There he was found to have normal intelligence and unusually good mechanical ability. At the school he had interviews with a case worker, but he never responded well to them, for he was highly suspicious of anyone connected with the institution. He did, however, make considerable progress in developing his mechanical abilities, and after some time he was allowed to leave the training school on parole and was placed in a residential club that the agency maintained.

During the first month of his stay in this residence George was friendly only with other boys from the training school and was very outspoken in his suspicion and distrust of the staff. In his relationship to the case worker to whom he was assigned he was overtly hostile and freely said that he considered him a policeman who was going to keep a check on him. The case worker's first opportunity to discuss this attitude with George came when he lost his job and could not pay for his room and board. George was immediately concerned about where he was going to get money for recreation, clothes, etc. In the interview about these matters he started the discussion by listing his grievances against society and the agency and the injustices that he felt had been accorded him in his short life. When the case worker agreed that he had had many deprivations, emotional and material, George was at first taken back but did become less insistent on being given financial aid. When the case worker pointed out that his comments really meant that he expected to have his request refused, George responded by citing many incidents to show that he was doomed to be distrusted, rejected, and dominated by people in authority.

For two months the case worker devoted the interviews to helping George to elaborate upon his intense feelings of deprivation and to giving

[7] Condensed from a case record of the Jewish Board of Guardians, New York City.

him sympathy and explanations in terms of his original family difficulties. His demands for clothing, for instance, called forth the comment that he must feel uncomfortable because he had no family to help him secure the things and give him the advice that would help him get along in the community. At the end of this part of the treatment George expressed his wish to see his mother. It seemed to the case worker that in making this request George was trying both to see whether the case worker would make the necessary arrangements for him and also to learn whether the case worker thought that he too was insane. In this interview George was led into a discussion of his reactions to life in the city, especially as it pertained to his adjustment to his job and his relationships with other boys and with girls. He gradually brought out that he was feeling much handicapped by not having a family (girls' parents, for instances, would inquire about that) and by having been in an institution as a delinquent.

From these discussions about his day-to-day living and his experiences in relation to other people, the worker was able to show George that part of the difficulty lay in his low estimate of his own worthiness. For example, George was constantly complaining about his low wages and the employers' indifference to his own and the other employees' welfare. In these talks George revealed a strong need to be respected by his employer; he would describe almost uncontrollable outbursts of rage against the employer when he made some derogatory remarks about his work. After George had told about a number of incidents, the worker was able to show him that he wanted to get unconditional praise and favor from the employer. The implication that he was trying to be the favored child made George angry; but when the worker pointed out that George had every reason to want to be in such a position because he had never had such love from any adult, George revealed even more how much he desired to be admired, loved, and understood. He said, however, that he could never expect to be in that position, for his physical make-up was unattractive and he had been damaged by his experience in the various institutions.

These comments and complaints called forth more sympathy from the case worker, but he also turned George's attention to his successes along mechanical lines. The case worker was also able to discuss the situation with George's employer and to secure his agreement to "give the kid a pat on the back." This the employer was willing to do, for George really did good work. As the boss's attitude changed, George became less suspicious of his motives and entered into bantering discussions with him. He also began to have more confidence in his own ability and so was able to accept the case worker's explanation that much of his difficulty lay in his distorted estimate of his own worth.

In the meantime George was invited to join in various activities carried

on under the club's group-work program. There he found in the group leaders the same attitude of sympathy and understanding he had experienced with the case worker, with the result that he was soon able to branch out and be friendly with all members of the clubhouse staff. As George himself put it, he found that "these fellows are not trying to tear me down because of what I was. They are trying to build me up." By the time that he left the clubhouse it was clear that George was no longer thinking of himself as inferior because of being like his mentally sick mother and his undependable father. Consequently, he did not have to fight everybody because of his oversensitiveness but could accept the rules of the game as he met them in everyday life.

The worker attributed this boy's delinquency to psychological maladjustment. His aim, however, was not to resolve the basic emotional conflict but to help the boy with his problems in social relationships (family, job, and associates) in order that he would not have to rebel against society.

Social group work

Attempts are frequently made to deal with delinquency by group work methods. Such work is often carried on in settlement houses or through boys' and girls' clubs, and in a few cities agencies specially organized for this purpose have been set up. To qualify as social work according to our criteria such group work would have to be specifically designed to help the individual group members to overcome the obstacles that stand in the way of their being law-abiding. Not that this would consist of a "head-on" attack on the problem; what we mean is that social group work would not aim only at providing recreational or informal educational opportunities for the children but would use these and other means to meet the individual children's specific difficulties.

Some indication as to how such group work may aid a delinquent child is given in the following case. Unfortunately, the case record did not make clear just what part the group leader took in the process. Notwithstanding the paucity of technical data, however, the case is of interest because it shows how group standards and group loyalties may be utilized to strengthen an individual club member's desire to be law-abiding. The case illustrates various other social work principles as well—notably, the influence of personal relationships on behavior; the ability of children to make a good social adjustment even though they are severely handicapped intellectually, physically, and economically; and the variety of resources that may be utilized in helping individuals to make an adjustment.

Case 27 [8]

Joe was a white boy, eleven years old, I.Q. 71, in the second grade in school. He was the sixth of nine children in a family that was known to many social agencies. The father was frequently drunk and seldom employed. The mother seemed to be incapable of giving the children adequate care. Joe's unkempt and ragged appearance was accepted by the teachers as inevitable. All the siblings had poor academic records, but some had attended school regularly and were now at work, while others had continually been truants, had juvenile court records, and seldom held a job long. The family's social inadequacy was of long standing.

Few as were the privileges that any of the children in the family received from their parents, Joe felt particularly discriminated against. "I don't get nuttin'," he told the psychiatrist when he was brought to a child guidance clinic for examination. "My sister, she gets it all. She makes her communion. I don't get no communion. They are all down on me."

About Joe's behavior there were many complaints. In school, in a room for subnormal children, he was said to be very quarrelsome, in need of constant supervision, easily discouraged by failure, and given to rapid changes of mood. Outside school he belonged to a gang of boys who frequently engaged in stealing and other antisocial conduct.

There were, however, certain positive factors in Joe's equipment, though they were not the sort that would usually be recognized as such. He was very small for his age, and he spoke indistinctly. As the psychiatrist put it, "He was very unattractive but made a very pathetic appearance." Apparently there was something in the pathos of his appearance that appealed to adults, for the teacher, a capable person, was said to be particularly interested in him, the principal was "very optimistic" about him, and the leader of a settlement house club to which he belonged was "enthusiastic about the boy's work." In addition he was an influential member of his gang, much liked by the members. Nevertheless, the school authorities often despaired about working with him. As the principal put it when the case was referred to the child guidance clinic, "I have known this boy for four years. He has been tried with several teachers, all of whom have said they could do nothing with him. My conclusion is that almost any monkey in the zoo could be more depended upon than Joe."

Although Joe became a patient of the child guidance clinic, most of the work with him was carried on by a club leader in the settlement house. The clinic's activities were confined to consulting with the schoolteacher

[8] Adapted from a case described by Frances Thompson in "Five Cases Illustrating the Possibilities and Limitations of Indirect Treatment of Problem Children," *Smith College Studies in Social Work*, V (1935), 230–36.

about the boy's behavior, and neither psychiatric nor case work treatment of the boy was attempted. The club leader had "enticed" Joe's gang into the settlement house, where they had been holding club meetings for a year or more before the incidents to be described here took place. During that time the gang had developed much affection for the club leader, and he had been able to teach them to use democratic, self-governing processes in conducting their club activities and had made some progress toward developing their interest in being socially conforming.

The gang, or club, was composed of "expert little shoplifters and beggars," but most of them had "kept straight" ever since the club had come under the settlement house's auspices. Joe, however, had been the most difficult child to handle. He attended meetings regularly but was a "disrupting influence" and continued his delinquencies on the outside. The club members wavered between accepting his leadership and abiding by the club leader's standards. They apparently compromised by always being amused by Joe's antics.

One day a crisis arose, centering around a particularly flagrant department store theft which Joe had committed. Action was taken by the club at the monthly "truth meeting," and there followed a rapid social transformation on Joe's part. At this truth meeting the club decided to make itself a court and try Joe. In that capacity they decided that Joe should go to the Juvenile Court Detention Home because of his offense and because he had a cold and needed a clean bed in which to sleep. After the decision, the club members lined up and shook hands with Joe, some of them weeping over his plight. The club leader took him to the Home that evening, and he stayed there for six weeks. The club members frequently inquired about him, visited him, and were very enthusiastic in greeting him on his return.

As to how Joe felt about this treatment it was difficult to determine. His replies to questioning varied from "The settlement house sent me there for nuttin' " to "I had to go there to get straightened out." He did admit, however, that he did not like the Detention Home and said solemnly, "I almost cried every day."

Whatever the inner workings of the change in Joe, it is a fact that his improvement dated from that time—both in school, in the settlement house, and in the neighborhood. At school the teacher reported that he was friendly, well liked, and no problem at all. In the settlement house he become so reliable that he was given a leading part in a play, and at an annual dinner in a large hotel he led the singing and "surprised everybody by being neatly dressed." Only once during the ensuing period of a year or more did he engage in delinquency. At that time several club members joined him, and he and they were temporarily suspended from the club by the others. Joe visited the settlement house regularly and begged

to be reinstated in the club. After he was finally taken back, his behavior became—as the group leader put it—"unimpeachable," and continued so from that time on, as far as is known.

Social Work in Juvenile Courts

One of the most disputed areas of social work activity is that which has to do with juvenile courts and probation. Some authorities view the juvenile or domestic relations court and the probation office as almost the equivalent of a family welfare agency.[9] Others say that courts should be restricted to the carrying out of the judicial function, and that the child care aspects of work with delinquents should be left to public and private child welfare agencies.[10] Our own survey of the functions of social institutions in general and of social work in particular leads to the conclusion that a juvenile court is not in itself a social work agency, but that social work has a function to perform with respect to courts and their charges just as it does with respect to schools and hospitals. It seems to us, however, that the supervision of delinquents who are on probation is an activity distinct from that of juvenile courts; hence in this survey of social work with delinquents we shall consider juvenile court and probation work separately.

Nature and function of juvenile courts

To enter into a detailed analysis of the place and function of courts in the general social structure of society would take us too far afield, for this is a subject which has occasioned much discussion and on which there is far from complete agreement. The popular conception of a court's function as that of determining disputes between individuals or groups may be noted, however, and with it one authority's point of view that while the "members of a court may perform many other functions they are a court only if and when they try an issue."[11]

Juvenile courts are sometimes regarded as being of a different nature. "The fundamental idea of the juvenile court law," wrote the

[9] This is the point of view of some leading members of the National Probation Association.

[10] For a discussion of various aspects of this view of the question see Alice Scott Nutt, "The Future of the Juvenile Court as a Case-Work Agency," *Proceedings of the National Conference of Social Work* (1939), pp. 370–80; Grace Abbott, *The Child and the State*, University of Chicago Press, Chicago, 1938, II, 338; Thomas D. Eliot, "Case Work Functions and Judicial Functions: Their Coordination," *Coping with Crime*, National Probation Association, 1939.

[11] Max Radin, "Courts," *Encyclopaedia of the Social Sciences*, II, 515.

committee of the Chicago Bar Association that in 1899 prepared the first juvenile court act, "is that the State must step in and exercise guardianship over a child found under such adverse social or individual conditions as develop crime . . . [so that the child] may be treated, not as a criminal or one legally charged with crime, but as a ward of the State, to receive practically the care, custody and discipline that are accorded the neglected and dependent child, and which . . . shall approximate as nearly as may be that which should be given by its parents." [12]

Juvenile courts were set up to take children out of the jurisdiction of the criminal law, with its jury trials, limitations on types of data admissible as evidence, and fixed penalties, and to permit the adapting of the sentence to the needs of the case. Accordingly, hearings in juvenile courts are usually informal, there are no attorneys and no jury, and social evidence in addition to that immediately related to the offense is admitted for the judge's consideration. That the child has been delinquent, according to the meaning of the law, must, of course, be determined; but since the term delinquency covers such behavior as waywardness, incorrigibility, and habitual disobedience, it is often not so much specific offenses as general conduct that is the point at issue.

To justify this departure from established legal procedure the common-law doctrines concerning the young child's incapacity for criminal intent and the court's function of *parens patriae* were adduced, for otherwise it might be held that juvenile courts do not proceed in accordance with due process of law. Concentration of attention on the social and psychological factors associated with delinquency and the kind of measures needed to alleviate them has led in theory, however, to a disregard and almost denial of the whole legal situation. Rather than affix penalties, judges are said to prescribe treatment, and all that is ordered is held to be for the child's own good.

This emphasis on the diagnostic and prescription-of-treatment aspect of the juvenile court's work has led some authorities to conclude that the juvenile court is a social work agency. In fact, as the complicated character of the factors involved in delinquency and the need for careful adaptation of treatment measures to individual needs have become increasingly evident, there has been talk of substituting social workers or psychiatrists for judges and giving the supervision

[12] Cited by Miriam Van Waters, "Juvenile Delinquency and Juvenile Courts," *Encyclopaedia of the Social Sciences*, VIII, 529.

of delinquent children over to child guidance clinics, child welfare workers, or other nonlegal agencies.

The conclusion that in carrying out its legally prescribed duties the juvenile court functions as a social agency rather than a court seems to be erroneous for several reasons. It overlooks the element of compulsion that attaches to all court activities; it glosses over the community's insistence that children be restrained from engaging in certain forms of behavior;[13] and in general it mistakes the methods of the court for its function. Actually, regardless of whether the procedure of a court is "socialized" or not, the fact remains that a court is an instrument of government among whose duties are, first, to determine whether the conduct complained about in a given case is the kind that is forbidden by law, and, second, to institute measures looking to the prevention of its repetition. That this latter objective is best accomplished by the court's finding out why a child engages in the forbidden behavior and basing its decisions on such evidence does not so alter the nature of the juvenile court as to make it a social work rather than a judicial agency.

With respect to social work, the conclusion that the juvenile court is a social agency seems also to be in error, for it equates social work with social diagnosis. This is a rather prevalent conception among social workers themselves, but consideration of the multiple causes of juvenile delinquency will indicate that no one profession can take to itself the task of determining whether a given child's conduct stems from neurological disabilities, defective intelligence, cultural conditioning, or adverse parent-child relationships—to mention but a few of the possible reasons for a child's committing delinquent acts. In performing such a diagnostic task and instituting appropriate measures for the correction of the difficulties the court has need of the help of numerous specialists, among them social workers. But it does not become a social agency thereby.

Case work in connection with court activities

Even though this point of view is accepted (that the court is carrying out a judicial rather than a social work function in determining whether a child's acts are such as are legally forbidden and in

[13] "The purpose of the law," Justice Holmes is said to have held, "has been to fix a line of minimum social conduct required of all men at their peril."—Walton H. Hamilton, "On Dating Mr. Justice Holmes," *The University of Chicago Law Review*, IX (December, 1941, reprint), 21.

setting in motion activities designed to forestall the likelihood of the continuance of such behavior), it does not follow that social work cannot be profitably carried on in connection with a court's activities.

The element of compulsion that is inherent in the court's relationship to its charges somewhat alters the character of the social work that is carried on under court auspices, even as social work under school or hospital auspices has its specific elements arising out of the nature of the problems to be solved. This, however, would seem to make it more rather than less necessary that social work with delinquents not be wholly dissociated from court connections.

There are two fairly distinct aspects of a court's work in connection with which social case work may be carried on. One is that of "intake"—the receiving of complaints against children and the making of arrangements through which charges may be preferred against them. The other is that of gathering and compiling information about the children's social situations for the judge's use. Both of these activities may be carried on in a routine manner or without reference to the individual peculiarities of the problems involved, and such a way of carrying them on is very common. On the other hand, both afford opportunity for that individualization of service and that attention to the difficulties attendant upon the utilization of a social institution that are the essence of social work.

These two categories of activities are usually entrusted to probation officers, although in some courts representatives of social agencies are given semiofficial status to assist in intake work. The historical basis of this practice is clear. As early as the middle of the last century prisoners' aid and children's aid societies and societies for the prevention of cruelty to children sent representatives to courts to investigate children's cases and to arrange for foster home placement, and in 1869 a Massachusetts law designated an agent of the Board of State Charities to do this work. A paid probation officer attached to a court was first provided for by a Massachusetts act of 1878. This officer, on the staff of the criminal courts of Suffolk County (Boston), was used to investigate persons charged with or convicted of crimes or misdemeanors and to "recommend to the court the placing on probation of such persons as may reasonably be expected to be reformed without punishment."

This use of probation officers to investigate cases, compile information, and make recommendations to the judge dates back, it will be seen, to those pre-social-work days when it was thought that a

dependent or neglected child's problems were solved when a new home was found for him. Supervision of delinquents who were placed on probation—like supervision of children in foster homes—was limited to routine checkup of their behavior, and the probation officer's main task was considered that of determining who should be put on probation rather than that of working with the children who were assigned to that status. This conception of the duties of probation officers is still widely held and accounts for the apparent inconsistency in procedure by which services to children placed on probation are under the court's administration while services to children committed to institutions or whose cases are otherwise disposed of are separately administered. With the entrance of social work into the field of probation it has seemed to some that the probation office should be separated from the court.[14] However that may be, to designate as a probation officer the person who receives complaints against allegedly delinquent children and investigates their social situations is confusing, to say the least. Under whatever title he operates, however, it is this person who can function as the court's social worker, for in this area of activity opportunities are presented both for helping individuals to make effective use of the court and for helping the court itself to individualize its services.

Let us consider first the activities centering around the court's intake. Social work skills can be utilized there in several ways. In the first place, there are many cases in which the individuals who are preferring charges against children are not wholly certain that this is a course of action they want to pursue. This is particularly likely to be the case when the complainants are the children's parents, but others may also feel dubious about instituting court action. To give such individuals an opportunity to discuss their doubts and indecisions as well as their reasons for wanting to take the case to court is clearly case work, not only because it calls for the use of the kinds of skills in which case workers are trained but, more important, because its purpose is to help individuals to make effective use of a social institution's services. The aim of these interviews is not (as might be thought) that of discouraging complainants from taking the cases into court; rather it is to help the individuals to act with a surety of conviction, for it is believed that even a parent's decision to institute court action against his child can often be mutually beneficial if the

[14] See, for instance, Thomas D. Eliot, *op. cit.*

parent can proceed without too many unresolved doubts about the wisdom of his action.

Social work in the court's intake office is also called for by the fact that the other possible sources of assistance to both children and complainants must be known, their services described, and, sometimes, their co-operation solicited. Then, too, there are interviews to be held with the children themselves, not only to secure information on which decisions about the course of action to be pursued shall be partially based but to help them, if possible, to relate themselves to the court in a manner that is socially beneficial. All of these activities call for that attention to the idiosyncrasies of individual clients' problems in relation to the use of social institutions which is the prime characteristic of social work.

The other aspect of social work in a juvenile court is that of collecting and compiling information about the cases for the judge's use and, presumably, the children's benefit. In order that the judge shall know what kind of treatment to prescribe, it is commonly held necessary that a complete record of the child's capacities and environmental situation be compiled. Among the data said to be needed are those regarding his behavior at home, at school, and in the neighborhood, his previous contacts with the police and courts, his living conditions, his relationships with and attitudes toward parents and siblings and theirs toward him, his religious and recreational affiliations, the character of his associates, as well as his physical and psychological assets and liabilities.[15] On the basis of this material the probation officer's duty is to make an "analytic diagnosis of the factors involved" with a view to aiding the judge to determine what kind of disposition of the case is most likely to secure the delinquent's social readjustment. Our earlier discussions about the nature of case work will have made it clear that much of this material will be valid and useful only if due attention is paid to the meaning the facts have to the children and their families. In addition, this social investigation aspect of probation work calls for the use of case work skills because in the process of collecting data many opportunities are presented for helping the children and their parents put the court's services to effective use.

In these various ways, therefore, social work has contributions to make to the juvenile court and its clients. It would be misleading,

[15] Ralph Hall Ferris, Director of the Domestic Relations Division of the Recorder's Court of Detroit, *In Probation and Criminal Justice,* edited by Sheldon Glueck, The Macmillan Company, 1933, New York, p. 138.

however, to imply that these social work services are available in most juvenile courts as presently constituted. Actually, most of the work of intake and social investigation is given over to untrained probation officers or other court officials who carry it on without any particular attention to the individual peculiarities of the persons concerned. In some few courts, however, social workers (either as representatives of social agencies or on the staff of the court itself) operate in more or less the manner here described and demonstrate that social work has a contribution to make to courts as to various other social institutions.

Is the supervision of delinquents on probation social work?

Among the chief duties of probation officers is that of supervising delinquents who are placed on probation by the court. It has already been pointed out that this part of the work could be conducted independently of the court, paralleling the training schools or other correctional institutions as means of dealing with juvenile offenders. This separation of the probation system from the juvenile court has been recommended in order to limit the court to the exercise of judicial functions and to place the discharge of social work functions in independent agencies. Our analysis would suggest, however, that there are social work services to be performed in connection with a court's judicial work also. These differ functionally, however, from the services to be offered in connection with the supervision of delinquents on probation, for the social institution with which they are concerned is the court, while social work with delinquents on probation centers around the community and its laws.

Regardless of whether the supervisory aspects of probation work are administered by the court or independently, the question of the relation of social work to them remains to be answered. The work of probation officers with children on probation may be simply supervisory or, in a sense, custodial; or it may aim, in addition, to give assistance to the children in overcoming the difficulties that stand in the way of their being law-abiding members of the community. In the latter case probation work would clearly entail social work activities; and it is here that the chief dispute about the proper scope of probation work centers. Some authorities say that probation work *is* social work; others recommend that all of the child care aspects of probation be given over to already established public and private social agencies.

Numerous arguments pro and con are adduced, but no conclusion has been arrived at that is satisfactory to all concerned.

One of the arguments for separating the supervisory functions with respect to juvenile delinquents from those of social work is put forward as "realistic." It points out that in most courts neither judges nor probation officers are equipped to deal with questions of social relationships. In spite of the fact that by 1939 all states except Maine and Wyoming had made express provision for separate juvenile courts or for specialized jurisdiction and procedure in other courts in the case of juvenile offenders, and practically all juvenile court laws authorized the appointment of paid probation officers, very few judges were specially trained for work with juvenile offenders, and the laws required only that probation officers be "discreet" or "suitable persons" or "of good moral character." [16] In this situation it is held by some to be futile to urge the carrying out of social work procedures; rather than work for the raising of probation officer standards, they recommend the entrusting of all social work with delinquents to already established agencies.

Against this seemingly reasonable position two arguments may be urged. On the one hand, most social work agencies are loath to accept many delinquents as clients, not so much because of the numbers involved but because the services of the agencies are specialized (centering, as we have seen, around difficulties in particular institutional relationships) and, in addition, are not likely to be profitably used by persons who became clients involuntarily. On the other hand, the choice of the proper social agency for each delinquent and the working with that agency in regard to the case would usually itself require knowledge of social work. It would seem, therefore, that whether or not the services of other social agencies are utilized, the social adjustment of delinquents (in contrast to the mere checking up on their behavior) requires that probation officers be trained in social case work.

Another argument maintains that the probation officer's position of authority over a delinquent makes it almost impossible for him to carry on social case work with the child. It is undoubtedly true that individuals cannot be forced to accept help with their problems of social relationships, nor can the authoritative element in the relation

[16] In some jurisdictions, however, probation officers are selected by competitive civil service examination, and educational qualifications, sometimes including training in social work, may be required.—Gilbert Cosulich, *Juvenile Court Laws of the United States*, National Probation Association, New York, 1939, pp. 7, 85, 86, 90–91.

of probation officer to offender be denied. These are reasons for concluding that not all of a probation officer's supervisory duties can be classified as social work. But they are likewise reasons militating against the delegation of the probation officer's social work functions to some other agency, for delinquents who are averse to discussing their social difficulties are probably no more likely to accept help from one source than from another.

A third argument refers to the confusion in attitudes and emotions that is entailed for the child and his family when the same person collects information upon which the disposition of the case is based, enforces the court's orders, and attempts to give assistance in adjusting to the community's regulations. This argument could be met by separating the work of social investigation from that of probation supervision—a separation that, we have seen, could be justified for other reasons as well.

Analysis of the actual work of probation officers leads to two conclusions with respect to its relationship to social work. First, not all of any probation officer's activities are social work, for in addition to being a social worker he must always function as a representative of the state entrusted with seeing that its rules for individuals on probation are enforced. Second, not all probation officers attempt to carry out the social work function, and those that do attempt it vary in the methods they use and their conception of the purpose to be served.

Methods of case work employed by probation officers

The probation officer's social work task is frequently carried on in the way recommended in Mary Richmond's *Social Diagnosis*. Much attention is given to producing what is considered a favorable environment for the child, and foster home care is quite frequently used.[17] Attempts are made to remedy the child's physical disorders and defects. Affiliation with organized recreational groups is secured and church contacts are encouraged. School changes are made if thought necessary; vocational guidance is offered. The objective is to bring about the child's "reintegration into society as a self-sufficient and permanently useful member," [18] and that end is thought to be frequently

[17] For an interesting description of the use of foster homes for delinquents, see Charles M. Schermerhorn, Probation Officer of the Juvenile Court of San Francisco, "Delinquent Boys in Foster Homes," *Yearbook of the National Probation Association* (1938), New York, pp. 225–39.

[18] Ralph Hall Ferris, *op. cit.*, p. 141.

obtainable if the probation officer will put enough energy and wisdom into working out his plan.

Of course the child's part in the program is not overlooked, but it is conceived as one of co-operation. Even Hans Weiss, one of the most skilled of probation officers and most understanding of children, said: "The probation officer is the executive of the plan. He organizes the helpers—teachers, club leaders, agencies, judges, clinics, parents, older brothers and sisters. The central link in the chain is naturally the child. Unless he is won over to the realization that he is on the team and not playing against it, our efforts are bound to be futile." [19]

That in its individualization of treatment and attention to social aspects of the problem this kind of probation work is social case work cannot be denied. But it lacks the sharpness of focus and precision of method which perception of specific function has given to case work in some other fields. Recent developments in case work make it increasingly clear that it is not the task of the social case worker to attempt to effect the total readjustment of an individual but rather to offer help in regard to difficulties that he is encountering in some particular group relationship. Likewise, since the sources of dissatisfaction, the reasons for the inability to operate well in relation to the organized group are known only to the person concerned (even though he may not be able to analyze them logically), and it is only through his efforts that changes can be made, modern case work works with the client rather than on his behalf. According to this conception, the case work of a probation officer should start with a frank recognition of the fact that the child has had restrictions imposed upon him and that the reason for this lies in certain of his deeds. Nor, under this theory, should the probation officer dissociate himself from the authority of the state. It is his job—both he and the child must recognize—to find out whether the probation conditions are observed, as well as to institute measures that may lessen the likelihood of the repetition of the illegal behavior.

The centering of the probation officer's attention around the delinquent acts is what differentiates this kind of probation work from that which is generally recommended. According to the plan usually proposed, the delinquency tends to be forgotten or pushed aside, emphasis is put on the probation officer's being the delinquent's "friend," and efforts are made (theoretically) to deal with all aspects

[19] Hans Weiss, "The Child on Probation," *Yearbook of the National Probation Association* (1929), p. 100.

of the delinquent's life which seem to the probation officer to be unsatisfactory. The new approach is more firmly based on reality. The right of the probation officer to be in the case at all is based on the child's delinquency. Both he and the child know that. They also know that to be subjected to the restrictions laid down by the court is usually unpleasant and is a kind of punishment, a fact which is evidenced by the imposition of greater penalties if the child's behavior does not change. The question then before them (and the fact that it is a matter between them and not one that primarily involves other people is one of the distinguishing characteristics of the new point of view) is what to do about it. Within this framework of restrictions, the probation system offers the delinquent an opportunity to work out the reasons why he has gotten into trouble and to receive help in removing the obstacles that stand in the way of his being law-abiding.

It is held, therefore, that the center of probation work should be the child and his disapproved behavior. Investigation of the environment surrounding him—both physical and personal—may be called for, and the probation officer may need to have the advice of physicians, psychologists, and psychiatrists if the child's physical and mental capacities seem to be conducive to his delinquency. The help of parents and foster parents, teachers, recreation workers, and others may have to be enlisted; but through all the work—motivating it and giving it direction—is the fact of delinquency and the objective of its elimination. Since ultimate control over that rests with the child, both his and the state's purpose is best served by planning with him rather than about him. The probation officer, as a case worker, offers his help to the child in overcoming and preventing a repetition of the situation in which the child finds himself, but he cannot by his own efforts force such changes to take place. The help may include many of the same activities as those used by probation officers under the other system—enlisting the parents' and teachers' interest, finding a suitable foster home, arranging for work or recreation. These activities, however, are carried on not primarily to forward the child's general welfare and so indirectly to prevent further delinquency but to remedy situations that are specifically productive of the child's misbehavior and usually so recognized by the child.

The causes of delinquency are many and complicated, and we do not mean to imply by these statements that a child can be a good diagnostician of all of them. What is meant is that insight into causes

can seldom be obtained when the child's feelings about the numerous aspects of his situation are left out of account. Nor are plans in which the child has no part and which do not engage him actively in improving his situation likely to be effective in developing his desire and ability to avoid further delinquency.

When probation is viewed in this light (as being a situation in which a child has been placed by the duly constituted authority of the state because of his misdeeds) and the probation officer accepts his part as representative of the state in both an authoritative and service capacity, it seems doubtful whether the proposal to delegate the treatment of delinquents to other social agencies is valid. This might profitably be done, of course, if the kind of assistance the other agency affords is what is found to be needed to overcome the delinquent tendencies. For instance, the treatment services of a child guidance clinic may be required for children whose delinquency is traceable to a psychiatric disability; those of a child-placing agency if the problem revolves around the child's adjustment to a foster home.[20] But even such cases would probably entail a joint decision with the child—so that he would know why he was using the services of the other agency—and joint work on the part of the probation officer and the other agency as well. In such cases the probation officer would retain his responsibility for finding out whether the child was abiding by the probation rules as well as for consulting with the child about the progress of the treatment measures.

Under such a conception of probation work the old problem of how to carry on case work within an authoritative setting disappears. In probation work it is authority that creates the situation in the first place and that determines its conditions and limits. The help that the probation officer offers the delinquent concerns the difficulties that brought him into that situation, and the help is afforded in the hope that through it a way will be found to prevent their recurrence. The probation officer cannot be helpful to his client by denying these facts, for the delinquent knows them full well. He cannot play the role of a "friend," for, as all delinquents maintain, a friend would not report one's misdeeds to the judge. He cannot play the role of a therapist, for

[20] It is to be noted in this connection that the work of a probation officer in supervising a delinquent placed in a foster home would probably be rather different from that of the usual child placement worker. The basis of the latter's work has been discussed in the previous chapter. A probation officer's work would probably center around the question of the child's ability to make use of the home to overcome his delinquent ways.

the essence of therapy lies in its nonjudgmental character. He can be only what he is—a representative of the state, employed to give aid and counsel to each delinquent with regard to eliminating or avoiding the situations productive of delinquency and to keep the court informed about the delinquent's progress in this endeavor.

The work of the probation officer so conceived, it will be seen, carries out the general social work function of helping individuals with the difficulties they encounter in a group relationship, rather than attempting to remodel them and all their environment. Emphasis is put not so much on what caused the maladjustment in the first place as on the dynamics of the present situation. As these are revealed, largely through conversations with the children themselves, aid can be offered in overcoming the obstacles to law-abiding behavior. This assistance will often include attempts to improve home, school, or neighborhood situations if it is in them that the present basis of the difficulties seems to be; but the central focus of treatment remains the child, and upon the probation officer's ability to arouse the child's interest in change and his assumption of responsibility for change the outcome usually depends.

Social Work in Correctional Institutions

Much that has been said about case work in the field of probation applies to case work in correctional institutions as well, but the institutional setting creates special problems that give this work a distinctive character. Children are presumably sent to training schools instead of being put on probation because the seriousness or the long-continued character of their offenses suggests that they can be helped to become law-abiding only if they are removed from the community and given the special training that the institution provides.

It is frequently held that commitment to a training school is not punishment but a means of furthering a child's welfare. The fact is, however, that institutions are often used for taking out of the community the children who are the most annoying, most difficult to handle, and most deprived, and those for whom no other provisions can easily be found. The result is that the training schools receive very divergent types of children, ranging from extremely feeble-minded to psychopathic misfits and including many who suffer chiefly from poor home and neighborhood conditions. The character of training schools' intake is changing, however, for with the enlargement of child welfare services courts are beginning to reserve institutional commitment

largely for children who appear to be amenable to treatment only under restraint, and they are making much greater use of foster home placement.

As with the probation system, the equipment of training schools in terms of personnel and policies tends to lag far behind theory. As described by leaders in the field, the aim of such schools is to effect the adjustment of delinquents to community life on the basis of a careful study of individual needs and the provision of remedies. A desire to punish is disavowed, and attempts are made to dissociate the whole system from that of crime and correction and to ally it with social work instead. This is in line with many child welfare developments, though, for some of the reasons noted above, the legal aspects of the work must not be overlooked. As Grace Abbott has pointed out in regard to juvenile courts, however, the "task [of curing rather than punishing], regarded as not difficult twenty-five years ago, is one for which, as experience showed, our knowledge of human conduct and our traditional methods of treatment were quite inadequate." Even the knowledge that is available is seldom wholly put into practice. There are a few training schools with excellent equipment and programs in one sphere or another, but it is difficult to find one that has the proper staff and facilities to provide all the kinds of assistance needed by the children in their charge.

It is not surprising, therefore, to find that social work in correctional institutions is seldom highly developed. Social work activities in this sphere have, however, a rather long history. They originated in the latter half of the nineteenth century in the prisoners' aid societies, organizations which were chiefly interested in finding jobs for individuals on release from prison and giving them counsel and guidance in their after-prison adjustment. Later the development of parole created a body of officials very similar to probation officers, who gradually came to regard their duties as in the field of social work. Finally, case workers were added to the staffs of some correctional institutions, particularly those to which young people were committed.

As they are now operating there are two general plans for the use of case workers by correctional institutions. The usual one is that which confines the case worker largely to work outside the institution. He collects data—much in the manner of a probation officer—concerning the child's life in family, school, and neighborhood, on the basis of which he draws up a report about the social factors accounting for the delinquent conduct. Together with reports of physical, psychological,

and, perhaps, psychiatric examinations, this material is used in drawing up a plan for the child's treatment in the institution. Then, during the period of the child's commitment, the case worker may keep in contact with the members of the family, attempting to enlist their interest in the child if it is lacking, giving them information about his progress, and making arrangements for his return to the community. Under this plan the case worker is not likely to have very much to do with the child himself, except perhaps to give him some information about his family.

By law, training schools and other correctional institutions for minors may retain authority over their charges until they come of age, and consequently "after-care" work is considered especially important. Some institutions have their own parole officers, frequently using the staff workers in that capacity, while in others children on parole are given into the probation officers' charge. Whichever system is in effect, the work at this time is fairly similar to that of probation (except that more emphasis may be placed on job finding and home adjustment), and the methods and quality of the work show the same kind of variation as has been described above.

It will be noted that this general plan for the use of case workers by training schools is of the information-gathering, environment-manipulation type that tends to disregard the part which the child himself has to play in his readjustment. The alternative plan, as yet well developed in only a few institutions, is more in line with modern case work theory. There the case workers have the double duty of helping the children to use the resources of the institution and to deal with the social situations that led to their delinquency. Under this plan case workers are resident members of the training school staff and are available to the children either by appointment or whenever the children feel the need for their services. These case workers are not so much concerned with making social investigations as with affording the children an opportunity to discuss their difficulties both in and out of the institution and to formulate and put into effect plans for the alleviation of these problems.

From information obtained through these interviews, as well as from discussions with the children's relatives, the case workers provide the rest of the institutional staff with data that may help them in their work with the children, even as they receive from other staff members information that will be useful in case work. For under this conception of training school work, the whole staff is engaged in a mutual enter-

prise for child welfare. Each staff member—administrator, teacher, recreation worker, "cottage parent," doctor, and so on—has his clearly defined part to play, and all work is directed to the end of putting the children in a position, psychologically, physically, and educationally, in which they can function adequately within the framework of legal restrictions which membership in a community imposes upon everybody.

Such combined efforts might be regarded as a special form of social group work. The following case illustrates how it was carried on with one delinquent boy whose problems were so extreme that he was at one time considered severely neurotic.

Case 28 [21]

Marvin, an eleven-year-old boy, was committed by the court to the Hawthorne School as a neglected child. He was extremely antagonistic to his mother, fought with her, had attacked her with scissors, and refused to go to school. He had had trouble getting along with people ever since he entered school. The other children teased him about his very large, protruding ears, and he retaliated by fighting with them and being generally aggressive.

Marvin's home situation was extremely bad. His father, who had deserted six years earlier, was a cripple, paralyzed on one side. His mother was an eccentric neighborhood character, who had been diagnosed a paranoid psychotic but not judged commitable to a mental hospital. She owned and operated a surgical appliance shop, the income from which was unknown but seemed sufficient to cover living expenses. She and Marvin lived in the back of the shop and shared a bedroom. Toward Marvin the mother was extremely dominating and possessive, not being willing to let him out of her sight. She had ideas of grandeur and persecution regarding both herself and Marvin, and Marvin had taken on some of her delusional ideas.

Marvin had been under psychiatric treatment in the out-patient clinic of a psychiatric hospital, where it had been recommended that he be placed in a foster home. His mother refused to consider this plan, but Marvin had been placed for a time in an institution on court order, the school authorities having taken him to court on a truancy charge. The mother interfered with his adjustment in the institution by her constant visiting and her complaints. Marvin's present placement in the Hawthorne School, an institution for socially maladjusted children, had resulted from the failure of this first placement.

[21] Condensed from a case record, Jewish Board of Guardians, New York City.

Psychiatric study at the School led to the conclusion that Marvin was in need of socialization and of being given an opportunity to develop some feeling of being a child. Some of his difficulties were thought to be due to his not having a father with whom he could identify himself, but more important was his relationship with his mother. It was recommended that a woman case worker help him solve this problem and that the "cottage mother" make a special effort to win his affection. His intelligence quotient was found to be 83.

On admission to the School Marvin was very quiet and kept to himself. He conformed to routine but made no effort to play with the other children. He had a furtive, suspicious way of looking at people and spoke either under his breath or in a very loud tone of voice. The children immediately began teasing him about his ears, to which he reacted by crying.

The case worker and both cottage parents worked together in trying to help Marvin. The case worker had regular weekly appointments with him in her office. He was uncomfortable in that situation at first—would squirm in the chair, respond in monosyllables to direct questioning, and was never spontaneous, this behavior being in marked contrast to his relationship with her outside the office. Slowly, however, Marvin began to talk with the case worker about some of his problems. His chief concern was about home visits: why couldn't he go home and why couldn't his mother visit him? (His mother was allowed to visit only once a month for half an hour and then under supervision, this plan having been deliberately made because of her personality and her relationship with Marvin.) The case worker got Marvin to discuss why he thought these restrictions had been put upon him, and she explained that because of the trouble he had with his mother the School thought separation from her might help him.

At first Marvin insisted that he loved his mother, missed her, and was homesick. Later he said the real reason he wanted to go home and have visitors was that he wanted to be like the other boys. This revelation of what Marvin was thinking led the case worker and the cottage parents to devise a plan for giving Marvin some special privileges to compensate for the restriction on his visits. These consisted of trips to the city, special assignments, and the like. Marvin was told that these arrangements were deliberately planned for him: that he was on the "special privilege list" because he deserved it for his good behavior (his behavior in the group really had improved greatly) and that in this he was like some other boys who adjusted well in the School in spite of being restricted in their home visits. Fortunately, the two boys to whom this applied were among the most popular in the School, so Marvin accepted the explanation cheerfully and went around saying "Me, Sunny, and Jim are on 'special privileges.'"

In the meantime the cottage parents were making a special effort to secure Marvin's interest and affection. In the beginning he was very shy, would stay on the edge of the group of children, and cry when he was teased. Gradually he became attached to the cottage mother and looked unhappy when she paid attention to the other children. Then he began to try to get close to the cottage father, but was rather pushed aside by the more aggressive boys. The father, however, engaged him in as many activities as he could without pressing him too much. The friendly response of the cottage parents and their willingness to let him go his own pace gradually broke down Marvin's shyness, and his next step was to find a boy in the group to be his "partner"; that is, his "buddy" or special friend. With that much achieved Marvin progressed rapidly. He began defending himself in a normal boy manner when teased about his ears—gave one boy a bloody nose in a fight about the matter and was very proud of the black eye he himself suffered from the combat. He accepted his share in household chores willingly and became a real participant in the cottage activities.

A concrete sign of Marvin's improved emotional adjustment was given by his realistic acceptance of the physical handicap his ears presented and his attempts to do something about it. He asked the cottage mother whether it would help to put adhesive tape on them at night. This request led the cottage mother to discuss with the case worker the possibility of securing a plastic surgery operation for Marvin, a plan with which he joyfully concurred. Carrying out the plan involved securing both the medical facilities and Marvin's mother's permission, the latter being a specially difficult task because of her persecutory ideas. The mother objected at first but Marvin told her, "They'll see that it gets done. They know how much I want it." The case worker was able to allay the mother's suspicions and to show her how much the operation meant to Marvin, with the result that she agreed and the operation was successfully performed. After this, Marvin's socialization continued apace, and he participated in school plays, enjoyed parties, and joined in the pranks and mischief of the other children. His attitude was summed up in a statement he made spontaneously to the case worker: "Before I came here I never played with boys. I never was to a party. Gee, what I've been missing!"

Suggestions for Further Study

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Land Reform & Cooperative Movement

Chapter XVI

SOCIAL WORK IN MEDICAL AND PSYCHIATRIC HOSPITALS AND CLINICS

In spite of differences growing out of the institutions with which they are associated, family welfare work and most of the social work in child welfare programs have in common the fact that they are concerned with the actions of individuals in social groups—in the family, the child-caring institution, the foster home, the school, or the community in general. In contrast, medical and psychiatric social work activities take their origin in the services physicians want to render to individual patients. The social situation with which these kinds of social work are immediately concerned is that which we have designated the "use of" rather than the "operation in" a social institution.[1] The distinction may not seem to be important, since much of medical and psychiatric social work branches out into the family, occupational, and community aspects of the patients' problems. Close analysis will show, however, that even these activities find in the treatment situation their reason for being, and are legitimately undertaken only because they help the patients to use or give effect to the physicians' services.

Medical Social Work

Social work's function of helping individuals to utilize the services of existing institutions is demonstrated with particular clarity in the activities of medical social workers, as those who work in hospitals and in connection with various medical programs are called. Analysis of these social workers' activities reveals the same historical development as found in other fields of social work, but the nature of the

[1] This is true also of intake work in courts, in which the clients are helped to decide whether or not they want to make use of the court's services. In a certain sense visiting teachers help children to "make use of" the school's facilities, and even family case workers may help individuals to take advantage of what family life offers, but, by and large, the group membership aspect of the situation usually predominates.

institution with which they are associated gives them a character peculiarly their own. To understand medical social work, therefore, we need to consider briefly its origin and development and to distinguish the various ways in which social problems impinge upon medical ones.

Origin and development

Medical social work, as a recognized specialty of the profession, came into existence about 1905, when social workers were added to the staffs of the Massachusetts General Hospital, in Boston, Bellevue Hospital, in New York City, and Johns Hopkins Hospital, in Baltimore, because of the growing conviction that adequate medical care must take account of the social problems connected with illness. The work of the "lady almoners" in English hospitals, which are for the most part charitable institutions, had furnished an example of what was needed and what could be done. Through the influence of the London Charity Organization Society, the work of the almoners had been changed in the 1890's from rather indiscriminate giving of free drugs and medicines to that of inquiry into the financial and social circumstances of patients, instruction of patients in the carrying out of the doctors' recommendations, and referral to appropriate sources for other kinds of aid. Then, too, visiting nurses connected with hospitals and dispensaries had brought to the attention of American hospital authorities the need to find some means of improving patients' home conditions and their understanding of medical prescriptions if treatment was to be successfully carried out.

A third important influence behind the establishment of medical social work was the practice, initiated at Johns Hopkins Medical School in 1902, of including social work in the medical curriculum. Medical students in that school were assigned as friendly visitors to families known to the Charity Organization Society and sometimes continued their contact with the families throughout their training period. As described by its originator, the purpose of this scheme was as follows:

> The students learn how the poor man lives, works, and thinks; what his problems are; what burdens he must bear. They learn the intimate relationship between the ills of the physical body and the home environment. They also learn how easy it is to give very good advice which will add burdens which cannot be borne. They find out that the poor man is not always a self-convicted sinner or a self-confessed ignoramus, and that he has his own ideas as to the necessity, and especially as to the possibility of

his following advice. The poor man loves his vices as truly as does the rich man, and will not abandon them at the off-hand suggestion of a strange doctor. The students find that to effect a much-needed reform, e.g., to keep the windows open, they must win first the confidence, next the love of the poor patient, and then stick to him closer than a brother to prevent relapses.[2]

The medical requirement—which this quotation makes clear—that physicians be well acquainted with the living conditions and habits and personalities of their patients and establish relationships of confidence and influence with them is almost axiomatic in medical work. Many factors, however, made this requirement increasingly difficult to satisfy. One was the specialization of medicine and the declining use of the "family doctor." Another was the greater use of hospitals, clinics, and dispensaries, in which patients were treated away from their homes and relatives, often by several physicians, and often for only brief periods of time. Moreover, cities had become so large and were composed of such diverse groups of people that a physician could no longer count on his personal experience to give him adequate knowledge about the customs and values of his patients. Agencies providing financial and other assistance for patients were also becoming more complex and specialized, even as standards of what was required were rising. These and other factors lay behind the initiation of social work services in hospitals and dispensaries, these being the places in which the gap between patients' needs and doctors' knowledge most clearly appeared.

The early medical social work was of a very practical nature. Social workers sometimes visited the homes of patients, talked with the patient's friends and relatives, and so secured for the physicians' use information about living conditions and facilities for care. More frequently they were assigned cases after dispensary examination or hospital treatment, their task being primarily that of helping the families to understand and carry out the doctors' orders. In addition, social workers spent a considerable proportion of their time making arrangements about such matters as convalescent care or supervision of children during a mother's illness, finding suitable recreational and educational facilities, securing financial assistance and jobs suited to the

[2] C. P. Emerson, "The Social Service Department of a General Hospital," *National Hospital Record* (March 15, 1909), pp. 5–7; quoted by Ida M. Cannon, *Social Work in Hospitals*, Russell Sage Foundation, New York, revised edition, 1923, p. 12. From this book much of the material in the preceding paragraph was also procured.

patients' capacities, and in other ways adjusting the environmental situation to the patients' physical needs. They also frequently included among their duties that of securing the physical examination of the patients' relatives, especially when tuberculosis or venereal disease was suspected.

This work, it will be noted, had much in common with the earlier conceptions of family case work. Starting with a specific problem (poverty in the one case, illness in the other), the social worker saw it as her task so to take charge of the client's life and affairs that the immediate difficulty would be removed and conditions created that would lessen the likelihood of its return. The fact that the social worker operated in a hospital setting tended to keep attention focused upon a somewhat narrower segment of the client's life than that which interested the family case worker; but even so the promotion of health was a wide enough objective to justify a social worker's interest in such diverse matters as the client's housing and household management, family relationships, recreation, physical conditions and management of his job, income and expenditure, and even his character and personality. Questions of the client's worthiness of being assisted did not play so prominent a part in medical as in family social work, for medical ethics does not distinguish between saints and sinners; but what medical social work lacked in moral emphasis it probably made up for in authoritative emphasis, for the rule that an ill person must not be permitted further to endanger his health is traditional in medicine.

This conception of medical social work led, however, into the same kind of difficulties that social workers experienced in other fields. Once social studies of any group of individuals are made (whether because they are sick, hard-pressed financially, delinquent, motherless, crippled, what you will), a wide array of difficulties of every nature is revealed, so that if one desires to bring about these individuals' general self-sufficiency many services far removed from those originally contemplated must be afforded. Quite aside from the question of the right of social workers to attempt to mold their clients' lives according to their own standards and customs, limits of practicability are soon discovered. Accordingly, in medical social work it was gradually decided to focus activities upon those social aspects of the patients' lives that are directly associated with illness or handicap treatment. In an official study conducted by the American Association of Medical Social Workers in 1933, for instance, the following statement is made:

The medical social worker needs to note that all problems growing out of illness do not fall within her scope. We think of the social component of illness as comprising not all such problems, but only those which show a continuous relation to the illness, its cause, further course, and treatment. Social problems growing out of illness may react upon the situation in such a way as seriously to affect the illness and its care, but, if this is not the case, such social problems seem to fall more appropriately to a social rather than a medical agency.[3]

That the proportion of illnesses that have such social components is high is suggested by a careful study of an unselected series of ward patients of the Presbyterian Hospital, New York City.[4] These were patients in the low-income group, but few were below the adequate subsistence level or were dependent upon relief agencies. The purpose of the study was to discover in what proportion of cases social factors produced so great a "depletion or disturbance of energy"—such as malnutrition, overfatigue, excessive emotional tension—that health was impaired. Factors capable of producing such effects were found to be of the following types: undue effort to earn subsistence, inadequacy of income, habits unfavorable to maintaining health, lack of satisfying social status, unfavorable habitat or locality, incompatibility and friction, inadequate shelter, lack of satisfying work, lack of personal service, and lack of satisfying recreation and social life.[5] Such factors were found present in about half of the patients studied; and it was concluded that about this proportion of ward patients in this kind of hospital need the services of medical social workers. Doubtless the proportion is higher in hospitals serving people who are even less favorably situated financially.

The kinds of problems with which medical social workers deal under this conception of their duties have been listed as those relating to the physical environment and subsistence, to social relationships, and to attitudes toward the illness and its treatment.[6] Physicians frequently need to have information about these aspects of their patients' lives, and patients frequently need help in these areas in order to make the best use of the physicians' services. As examples of the kinds of assist-

[3] Harriett Bartlett, *Medical Social Work: A Study of Current Aims and Methods*, American Association of Medical Social Workers, Chicago, 1934, p. 147.

[4] Janet Thornton and Marjorie Strauss Knauth, *The Social Component in Medical Care*, Columbia University Press, New York, 1937.

[5] *Ibid.*, pp. 214–225. The factors are described in detail with case examples, pp. 114–215.

[6] Harriett Bartlett, *op. cit.*, pp. 98–103.

ance medical social workers afford when they conceive their duties in these terms the following may be cited. They often try to secure better housing arrangements or financial assistance for the patients so that they may have the kind of shelter and diet that their physical condition requires. They counsel with housewives about the problems of household management which illness creates, perhaps procuring the services of a visiting housekeeper to tide a sick mother over a period of incapacity or helping another to budget her expenses so as to be able to purchase the needed kinds of food. They put handicapped persons in touch with vocational training bureaus or secure their employment in "sheltered workshops." They attempt to stimulate the development of interests and hobbies, since taking a patient's attention off his problems is often considered an important part of the treatment of his disorder. In connection with these and similar activities of a practical nature, social workers may discuss with patients their attitudes toward their disabilities and its attendant problems for, as the report cited above puts it, "It is the social worker's aim to help the patient, from her greater knowledge of what he must face, to understand his problem, to analyze his activities and responsibilities, and to work out together a regime which would best fit his needs." [7]

Much of this work, it will be seen, stems from the medical view of the case. The social conditions that are to be altered, the material aid that is to be given, the attitudes that are to be dealt with are largely determined upon by the social worker in consultation with the physician, although, of course, the wishes of the patient and his family are necessarily taken into consideration also.

In recent years developments in other fields of social work, and in medicine as well, have thrown some doubt upon the wisdom of this orientation, and attempts have been made to shift the focus of attention from the disease or disability to the patient himself. Under this conception, the center of the social worker's interest is not so much the medical or social causes of the difficulty (although these, of course, are not neglected) as the patient's feeling about his situation, it being held that some of the most important blocks to medicial treatment are found in this latter area. The fears that patients have about the hospital and medical therapy, the difficulties they experience, for instance, in facing a diagnosis which has social implications (such as tuberculosis and venereal or mental disease), the numerous reasons for their concern about entering a hospital and undergoing treatment, their

[7] For further analysis of this work see *Ibid.*, pp. 95–128.

fears about being helpless, losing consciousness, being mutilated, being separated from their families, exposing others to their disease—all these and other worries are usually disclosed only if the social worker's attention is directed toward helping the patient talk about his problem, with no fixed plan about what course of action is to be pursued.

Such an approach does not at all preclude the eventual carrying out of the medical social worker's customary activities—helping the patient and his relatives to understand the nature and implications of the disease, helping them to make arrangements that facilitate recovery and to procure material assistance of one kind or another. In this kind of medical social work, however, these activities do not so much result from a plan made for the patient by the professional staff as grow out of discussions with the patient or his relatives about the difficulties involved in carrying out the physician's recommendations.

The social worker, of course, does not carry on his work independently of the physician and the hospital. He comes into the case at all only because a physician sees some need for his services (wants him to secure some information or to give the patient some designated sort of assistance), and the purpose of his work, in one sense, is to facilitate the hospital's functioning. On the other hand, the social worker's task is to help the patient to make effective use of the services the hospital offers, through helping him to surmount the difficulties, material and psychological, that seem to him to stand in the way. In short, the social worker stands between hospital and patient, bringing to the physician information about the patient's economic and social circumstances and about the attitudes and feelings which have bearing upon the patient's actions in regard to his illness, and helping the patient (or those responsible for his care) to work out what they want to do about the physician's prescriptions and recommendations. This kind of social work, it should be further noted, is not limited to patients whose physical problems are caused by or inextricably bound up with economic difficulties but is applicable to all patients who feel the need of assistance in moving forward with their plans.

Examples of current medical social work practice

The question of how such help is rendered is a technical one that lies outside the scope of this book. It is obvious, however, that to give assistance of this kind requires much more than friendliness, sympathy, good will, and knowledge of the resources of social agencies, for to sense what a person is trying to say, to create a situation in which he is

free to say it, and to keep one's own feelings and opinions from interfering with another person's expression of emotions and attitudes requires great skill and disciplined sensitivity and a flexible use of one's relationship with a client; in short, it is a highly technical job. In the following description of one interview it may be possible, however, to get some sense of how this kind of case work may be of more help to a patient than that which consists of telling him what to do.

Case 29 [8]

Dr. Sherman, visiting staff consultant in a large public hospital, called in a social worker to the clinic to advise that the patient, an eight-month-old infant with congenital clubfoot, was in need of a night splint to wear for corrective purposes and must have regular manipulation and exercise three times a day for ten minutes at a time. It was expected that the clubfoot could be corrected in this manner without surgical intervention. The social worker went out into the corridor to locate the patient and mother and was directed toward them by the clinic nurse. Until the worker stood directly in front of them, the mother averted her eyes and stared fixedly at the floor. She was a tall, rather gaunt girl of Nordic appearance . . . better dressed than most of the patients. The baby was daintily clothed and wrapped in a hand-knit blanket.

"Are you Mrs. Steele?" greeted the worker. The patient's mother looked up with a cold, blank stare and said, "No, I'm no Mrs.!" The worker hastily glanced at the medical record, noticed that the mother was unmarried, and remarked in a friendly tone, "Let's make it Anne, shall we? Will you bring the baby and come upstairs where we can discuss the doctor's orders with a little more privacy?" "Yes, I'd like that better," said the mother. . . .

"Did the doctor tell you what he recommended for your baby?" the worker asked, after they had come to her office and had a bit of general friendly conversation en route. "No, I didn't hear him say a thing because every one was making so much noise," she replied, with some return of defensiveness expressed in clutching the baby closer. She continued, raising her voice, "I'll bet he wants to cut him like what happened to my fingers," holding out her left hand, showing the ring finger and middle finger amputated at the first joint. It seemed to the worker that, instead of pursuing the recommendations of the doctor, it would be well to encourage

[8] From a case described by Harriett M. Bartlett in *Some Aspects of Social Casework in a Medical Setting,* American Association of Medical Social Workers, Chicago, 1940, pp. 71–74. Other cases, illustrating in more detail this type of case work, are to be found in Chapter II, pp. 32–107.

the mother to tell of her own experience, as obviously she related it in some way to the child. "How did that happen?" the worker asked.

The mother relaxed and glancing again at her fingers and lowering her voice, which had risen several tones, said, "I was working in a bakery in Jamestown and was cleaning a cake-cutting machine, when the knives slipped out of a groove and came down on my hand."

"Was there pain at first?" asked the worker. "No, it felt numb. I couldn't even yell, but the machine made so much noise that the janitor came and found me. I couldn't tell they were cut off till I came to, after doc had finished with me at Middletown Hospital." "How did you feel about your accident?" "I just thought—things happen to me, no matter what." The mother did not complete the sentence, but the impression left was that the reference was to the illegitimate pregnancy. She became more voluble. "I didn't even think much about compensation at first until my brother said, 'Don't be a sap! Get all you can. You're a cripple for life.' "

"When did this happen?" inquired the worker, as she decided to direct the interview to the point where the mother could express her feelings and clear up false ideas.

"Last year—just before I—well, you know—" She faltered somewhat but demanded the worker's gaze. "Isn't that what made the baby's foot that way?" she queried in a flat, even tone, conveying to the worker her effort at perfect control and casualness. She was evidently steeling herself for confirmation. The worker looked directly as the mother, who had dropped her eyes and was gazing at her mutilated hand. "No," she said, "I can assure you there's no possibility of that happening. The doctors have proved that mothers cannot in any way mark their children, so don't let that worry you." The mother said nothing for a moment, but tears slowly ran down her cheeks. "Honest to God?" she finally quavered. The worker replied, "I am sure of this."

The mother clasped the baby, jostled him around, and in an attempt at bravado said, "Then I won't worry. Gee, I'll get along now that I know it's not me that caused his foot to be that way. What did the doctor say I should do?" "We'll have to get a little splint for him and take you down to physiotherapy so that you can learn how to exercise his foot. The doctors think they may be able to correct this without any operation, if you follow exercises and come in regularly to the clinic." "That's easy," she smiled, chucking the baby under the chin. "I can learn pretty quick." . . .

The worker explained where the orthopedic shop was located and the cost of the splint. The mother confidently said that she could pay for this at once and then continued with her plans for the future. She had referred herself to the State Department of Rehabilitation and was to begin work in a short time. She expected to get between $15 and $20 per week. Meanwhile she was receiving $9.60 a week compensation and had been paying

her mother $6.50 a week for board and room for herself and the baby. She had arranged that her mother would take care of the child during the day while she herself was employed. She spoke of these plans with confidence and buoyancy. . . . As she left, she extended her hand and said quite simply, "Thanks for—well, you know!"

Apparently this case was referred to the social worker's attention because the doctor was not sure that the mother understood his instructions or knew how to secure the necessary appliances. It will be seen, however, that the social worker's chief service did not lie in elaborating upon the doctor's directions or making arrangements for the mother to get the needed equipment and instructions but rather in sensing that something stood in the way of the mother's making use of the advice she had come to the hospital to obtain. The social worker's willingness to follow the mother's train of thought rather than to go ahead immediately with her own plan for helping her led directly to the disclosure of the fear and the phantasy that had kept the mother from even listening to what the doctor had said. When these were revealed it was possible to assure the mother that the child had not been "marked" by what she regarded as her misconduct and would not be punished as she thought she had been. Fears such as these are not always so easily dispelled, but in this case the mother was able to accept the social worker's reassuring statement and, from that point on, move straight ahead in making her plans and using the hospital's facilities.

Interviews of this type form the central core of case work in a medical setting, but they do not, of course, account for all that a medical social worker does in helping individual patients. Some of the more concrete services are illustrated in the following case, which also indicates how a social worker may be helpful in relieving the patient of worry about home matters and so make his favorable response to medical treatment more likely.

Case 30 [9]

Mrs. T was referred to the case worker by a physician in the medical clinic, who requested that she be sent to a convalescent home in order to help her gain weight. She was greatly emaciated, exceedingly nervous,

[9] Eleanor Cockerill, "Intake Process in a Department of Medical Social Service," reprint from *The Family* (October, 1940). See this article for other cases, chiefly as seen by a medical social worker who acts in an "intake" capacity.

and suffered from profuse bleeding which seemed unrelated to any organic abnormality.

The worker's first contacts were with Mrs. T's husband, because at the time of referral Mrs. T was confined to bed at home. Mr. T described his wife as a very nervous person and commented, "She looks like a human wreck. I often tell her she looks like a woman eighty years old." He explained that their seven-year-old daughter was not his child but the offspring of an earlier illicit relationship—"It was one of those things, you know." The worker learned that Mr. T was reporting regularly to the clinic for treatment of gonorrheal urethritis; also that the family had received relief and that Mr. T had previously served a term in a federal penitentiary.

The worker began her first interview with Mrs. T with the impression that she would be bringing a good many problems and that her need for convalescent care would probably assume a pretty minor role. She was surprised to discover that Mrs. T was a very self-possessed person, who attributed all her present difficulty to the fact that she had found the strain of working as an apartment superintendent too strenuous and saw as her only problem the fact that she needed to "get built up." She said that she had never experienced difficulty in obtaining work and that as long as she could work life held no problems for her. The worker accepted Mrs. T's analysis of her problem and immediately set about helping to arrange a period of rest for her. This involved making arrangements for the care of the seven-year-old daughter.

The worker learned a great deal during this period about some of the tensions under which Mrs. T was living. She was obviously very apprehensive about leaving Helen in the care of her husband. Her great anxiety about Helen was expressed in many ways. At one time when the child was being examined in a clinic, before being placed in a foster home by a children's agency, Mrs. T commented, "I would rather be hurt myself than have it happen to her," and on another occasion she said, "That child is my whole life. If anything should happen to her I'd be finished." But Mrs. T showed no desire to discuss her relationship with Helen further.

The worker continued to be as helpful to Mrs. T as possible in making plans. There were occasional remarks by Mrs. T such as, "I guess I didn't know when I was well off. Women often don't," but this was as close as she came to any real discussion of her other problems. She seemed to feel very comfortable with the worker, however, and one day said spontaneously, "I thought the world was going to cave in on me and then I met you. Now I think I can find a way out."

Just before Mrs. T left for the convalescent home, the worker received the following letter from her: "I appreciate what you are doing for us

and I'm not going to worry any more. I have enough faith in you to know Helen will be in good hands while I'm away. I think too much; at this particular time my mind is tearing down my body. Miss Smith, you shared my problem with me, didn't you? Well, when I am strong again I am going to you, not as a social worker but as a friend, and tell you just what is on my chest. Two months' rest with good food will place me on my feet again. Believe me, Miss Smith, I do have a serious problem. Just as soon as I return you and I are going to get together and straighten out the mess I'm in."

In addition to carrying on case work with individual patients, medical social workers may be assigned to other duties in a hospital. They may be put in charge of admissions or they may have contact with most patients at the time of discharge. They may be called upon when financial adjustments are to be made or when the hospital has a "follow-up" program of research or treatment. The trend in hospital practice, however, appears to be away from using social workers for routine duties and toward a more selective use of their services.

Then, too, medical social workers are rather frequently used in maternal and child health programs, in those conducted for crippled children, in public health departments, and as consultants to such organizations as visiting nurse or public relief agencies. In some of these agencies they are called upon for advice in forming programs and setting policies in regard to the medical-social aspects of clients' needs, while in others they may administer the financial assistance that is granted for medical reasons. This work calls for special activities and skills, but the manner in which they are performed varies with the medical social worker's conception of the needs of sick people and of his task in relation to them.

Psychiatric Social Work

One of the subjects of dispute in modern case work is whether the term psychiatric social work should parallel that of medical social work and refer largely to activities carried on with or on behalf of the patients of psychiatric clinics and hospitals or whether it should include all work that is carried on with particular awareness of clients' psychological difficulties. It will be clear from the cases cited as examples that in our opinion all work with clients must take psychological factors into account; that, in fact, the client's conception of his difficulties and his capacity to take help in doing something about them form the basis

on which case work operates. In addition, the definition of the function of social work at which our analysis arrived excludes from the field of social work the treatment of personality problems per se. We are accordingly using the term psychiatric social work in the first of the two senses mentioned above,[10] although—as with medical social work—it may sometimes be carried on outside a psychiatric clinic or hospital setting.

Social work with the patients of psychiatric clinics and hospitals, as with medical patients, is called for by reason of the interrelatedness of psychiatric and social problems. On the one hand, the fact of mental illness usually creates social difficulties for the patient and those who live with him. On the other hand, social conditions themselves often create or at least enhance psychological difficulties. Both of these facts necessitate attention being given to the social aspects of a patient's life if the treatment afforded by a hospital or clinic is to be useful to him. In addition, there are numerous reasons why patients and their relatives may find it difficult to use psychiatrists' services at all. Dislocations in the home and work situation may be involved; fears of what the treatment will consist of are frequent; and overshadowing all else in many cases is the social stigma attached to the admission of mental illness. The significance of these statements cannot be appreciated, however, or the objectives of psychiatric social work understood without some knowledge of the modern theories of psychiatry and mental hygiene.

Social aspects of psychiatry

One of the basic generalizations of modern psychiatry is that people suffering from mental disorders are not a distinct, clearly demarcated group, unhuman because of the nature of their malady. Instead, it is widely accepted that most mental disorders represent a way in

[10] By this limitation of the term we would not deny, however, that a worker who has specialized in psychiatric social work may be especially helpful to the psychologically maladjusted clients of social agencies. What we are maintaining is that such a worker is not usually carrying on psychiatric social work when he acts as, say, a visiting teacher or a representative of a family welfare agency.

It might also be stated in this connection that in our opinion there is a possible need for a new profession (which might be called psychiatric case work) because there are not enough psychiatrists to meet the demand for treatment of personality problems of a mild nature. Even if, however, an abridged kind of psychiatric treatment by a person who is not medically trained is feasible and if present training in psychiatric social work would equip an individual for such work under a psychiatrist's supervision (as has been suggested), the work itself would not be *social* work.

which the biological organism adjusts itself to the demands of social life, and that psychotic individuals are only displaying in extreme form the behavior that, in lesser degree, characterizes many people who find difficulty in accommodating themselves to other people and co-operating with them. Accordingly, psychiatry is concerned not only with psychotic or neurotic patients but with all individuals who find life difficult because of inner tensions.

To that category belong many so-called problem children—not only those who are obviously "queer," but many who do not conform to school or home discipline, who have "bad habits" of various kinds, or who are very shy and timid and overgood. As adults, such people may reveal their psychological difficulties by many kinds of symptoms, some of which are even socially prized. Personal, domestic, and occupational inefficiencies are often indications of psychological disorders, as are peculiar mannerisms, extreme doubts and scruples and fears, and compulsions to act in ways generally regarded as unusual. Then there are morbid sensitivities, suspicions, and feelings of persecution; there are chronic fatigue and irritability and illnesses for which no physical basis can be found. These and numerous other kinds of symptoms appear in mild form in many socially competent people and to an extreme degree in those who are called psychotic. They are deeply ingrained in the personality and can seldom be wholly dissipated. The use to which the individual puts them and the degree of their domination in his daily life can, however, often be altered by psychotherapy or by favorable experiences, and it is the aim of mental hygiene and psychiatry to bring about such changes.

Numerous theories have been advanced to account for the origin of these difficulties in human relationships. Although there are various schools of thought about the matter, it is agreed that the cause is not mere lack of will power or unwillingness to act in a rational manner. Still less are the difficulties explainable on the basis of wickedness or possession by evil spirits or some other fall from grace. It is not even thought by most authorities that the majority of mental disorders are the result of medical diseases, such as lesions in the nervous system, endocrine glands, or other organs of the body.

The disorders that take the form of mental deficiency are usually constitutionally determined.[11] By heredity individuals may from birth have little possibility of growth of the higher nervous system, or these

[11] The following account is adapted, in part, from an article by Harry Stack Sullivan, "Mental Disorders," *Encyclopaedia of the Social Sciences* X, 316–17.

tissues may be damaged by early injury, or their organization and functional activity may be delayed or enfeebled by chemical deficiencies in food intake. Such individuals, to greater or less degree, lack the capacity of incorporating into their personalities the values, customs, knowledge, and skills of the cultural group to which they belong and so are limited in their capacity to join in social undertakings. Some other individuals—a small proportion of the mentally deranged—suffer from diseases or injuries to that portion of the brain on which human as contrasted with subhuman conduct depends.

The majority of personality difficulties, however, are believed by many authorities to be traceable to interpersonal causes, especially to those experiences of early childhood through which the capacity for emotional growth is stimulated or retarded. During that period individuals are particularly in need of well-balanced affection and discipline in order that they may face the world without fear and may gradually achieve emotional independence from their parents. It is held by many psychiatrists that only individuals who have such favorable experiences—either at home or in some other relationships with people—can make full use of their native capacities and participate in social undertakings in a consistently rational manner. Others—and there are many of them—who are subjected as children to the strain of being disliked and inconsistently handled are rendered emotionally insecure and are likely to develop one or another kind of compensating device that may make their lives endurable but that will probably mark them as "peculiar" to a greater or less degree. Many of these people will be able to function in an apparently normal manner as long as the environment remains fairly favorable, but they will find unusual difficulty in adjusting to misfortune of any severe kind.

Not all psychiatrists would agree with this description of causes of mental disorders, nor would all explain mild personality disturbances by the same theories with which they account for most frank psychoses. It is firmly expected by many, for instance, that a neurological or chemical basis for the graver disorders will some day be found. In the main, however, most psychiatrists at least agree with Adolf Meyer, who as early as 1906 insisted that mental disorders represent inadequate habits of dealing with the difficulties of life and that they involve the whole organism, which is a "physico-chemical, biological, and psycho-biological integration." [12]

[12] Adolf Meyer, "Growth of Scientific Understanding and Its Relation to Social Work," *Proceedings of the National Conference of Social Work* (1923), p. 196.

The emphasis on interpersonal relationships as a causative factor in mental disorders has led to the "socializing" of psychiatry as well as to the extension of its interest into fields that would once have been considered quite outside its scope. The mental hygiene and child guidance movements, for instance, developed out of psychiatrists' interest in preventive work, it being thought that the more serious forms of maladjustment might be avoided if treatment were initiated early enough. Later research threw some doubt on the possibility of identifying future psychoses in childhood. In the meantime, however, it became increasingly recognized that there are children and adults who suffer from psychological maladjustment and are in need of psychotherapy even though they are not future candidates for mental hospitals.[13]

Distinction between psychotherapy and psychiatric social work treatment

From these theories and discoveries it seemed at one time an easy step to the conclusion that all difficulties that individuals encounter in social relationships are indicative of psychological maladjustment and, more important, that they can be eliminated only through the use of psychiatric methods. Social case work accordingly "went psychiatric" and became for a time a pale counterpart of psychiatry, taking as its function the cure of the milder types of psychological disorders and the alleviation of others through friendly emotional support and the favorable reconstruction of the environment. The distinctive contribution of social case work—the helping of people with the difficulties they encounter in organized group relationships—was in danger of being lost sight of because of this concentration of interest on effecting personality change. It is only in recent years that a clear-cut distinction between psychotherapy and the psychological aspects of case work has been drawn. Close study of both fields suggests that the distinction turns on the conception of the adjective "social," and that much misunderstanding has been engendered by too broad a definition of that word.

[13] Another area into which the newer conceptions of psychiatry led was that of organic disease. Just as many maladjustments in social behavior are seen to be traceable to psychological disorders, so the influence of emotional factors on the behavior of the physical organism has become the subject of close investigation, and "psychosomatic medicine" gives promise of eliminating the age-old distinction between mind and body.

One of the newest scientific journals in the field of psychiatry [14] uses the term "interpersonal relations" to characterize the area of psychiatry's chief interest, indicating thereby its subscription to the theory that psychological disorders in the main signify difficulties in adapting to other people. Such disabilities may, of course, account for an individual's inability to play his part in particular organized groups and make use of their services, but they are not the only—or perhaps even the most usual—cause of difficulty.

As has been shown in various connections, people may encounter difficulties in social, as contrasted with interpersonal, relationships because of lack of money, poor health, mental defectiveness, ignorance, divergence in customs and values, as well as because of their basic psychological maladjustment, and it may also be that the source of the trouble lies in the organized groups themselves. It is the social worker's professional task to discover—sometimes with the help of other professional workers—which of these factors are chiefly operative in a given case and to help the individual and, in some cases, the members of the organized group (such as teachers, foster parents, hospital staff) to work out a way of mitigating them. In attempting to aid people with their social difficulties, social workers may therefore need the assistance of physicians, psychiatrists, psychologists, and others, but their own peculiar task is not that of bringing about personality changes but in helping individuals to use their own personality strengths to operate in or make use of particular organized group relationships.

The implications of the distinction between "interpersonal" and "social" are of special importance for case work that is carried on in mental hospitals and psychiatric clinics, including those of child guidance, for the respective provinces of psychiatrists and social workers are sometimes not clearly defined. Some psychiatrists, especially in child guidance clinics, limit their activities largely to recommending environmental changes in their patients' lives, while some case workers attempt to carry on a kind of psychiatric treatment of the patients or the people with whom they have most intimate contact. For the psychiatrist to confine his attention to social measures may lead to a disregard of the dynamic factors in a patient's difficulties, while for the social worker to attempt to alter personality traits may divert him from his true function of helping patients and their relatives to work out a way of dealing with the social problems that psychological malad-

[14] *Psychiatry: A Journal of the Biology and the Pathology of Inter-personal Relations,* published by The William Alanson White Psychiatric Foundation, Washington, D. C.

justment may involve. Just what this generalization means in practice may become clearer in the following descriptions of case work in various types of psychiatric agencies.

Case Work in Mental Hospitals

Mental hospitals, like other social institutions, vary greatly in staff, equipment, and theories underlying their work. Many are custodial institutions, designed to provide physical care for patients and protection for the rest of the community from the patients' irresponsible acts. The majority of hospitals, regardless of what theories of psychiatry are held by the staff, provide little individualized treatment but rely on the regimented daily schedule and the monotonous, neutral atmosphere to effect spontoneous recoveries, although various kinds of medical remedies (such as drugs, elevation of bodily temperature, induced shocks) may be used with selected patients. In a few hospitals psychotherapeutic methods are employed (such as psychoanalysis, psychocatharsis, and habit-training) that depend in large part upon the utilization of the psychiatrist-patient relationship. Whether a hospital uses case workers at all and, if so, how it uses them depend in part upon the theories of psychiatry that underlie its work.

Influence of various conceptions of psychiatry on case work practice

The situation in this respect bears much similarity to that found in the use of case workers by schools, courts, and medical hospitals: to see a place for social work in connection with their activities, the administrators of these institutions must recognize some connection between the behavior of those they serve and their social situations. Social workers are characteristically first employed in schools, courts, and hospitals to furnish information about the social aspects of clients' lives that are thought to have bearing on their behavior.

The psychiatrists who first used social workers sought data about the social environment and behavior of their patients because they believed they would thereby secure much evidence on which to base diagnoses and treatment plans. This point of view was first developed by Adolf Meyer and was a direct corollary of his theories about mental disorders. He held that the nature of a psychological disorder, its causes and its prognosis, could be assessed and treatment measures undertaken only if the therapist had a clear understanding of the "mental" factors involved. He recognized that certain disorders were attribu-

table to disturbances of particular organs of the body, but in the main he held that organic dysfunctions were incidental in a development that involved the reaction of the individual as a whole. Before undertaking treatment, therefore, he considered it necessary to make a "frank and reasonably balanced review of [a patient's] responsiveness and his positive and negative assets in the form of specific samples from the whole wide range for practical performance." [15] It was these "samples," in the form of information about a patient's heredity, early life, relations with people, jobs and performance on them, interests, ambitions, capacities for satisfaction, and so on, which psychiatrists wanted social workers to secure through interviews with relatives, friends, employers, and others who knew the patient well.

Another aspect of the social worker's task, soon added to that of information gathering, was also a direct outgrowth of this theory of psychiatry and its therapeutic procedures. Patients who were sufficiently in touch with reality to engage in discussion were taught "actually to take different attitudes toward things." "Habit training," wrote Meyer in 1908, "is the backbone of psychotherapy. . . . Much psychopathology and psychotherapy will depend on the bracing of weak organs; but its work is not concluded before the patient is shown the level of his mental metabolism, the level of efficient anabolism and catabolism in terms of conduct and behavior and efficient meeting of the difficulties worth meeting and avoidance of what otherwise would be a foolish attempt." [16] Along with this sort of re-education, which made use of both insight and suggestion, went attempts to straighten out the patient's environmental situation and to ease the strains which his family or occupational life imposed upon him.

This latter part of the treatment measures was soon entrusted to psychiatric social workers. In the course of this work the patient's problems were discussed with the persons with whom he lived, attempts were made to help them to understand his needs, and suggestions about his posthospital care were made. Social workers also tried to find jobs for patients who were sufficiently recovered to engage in work, and to enlist the help of friends and relatives, ministers, recreation workers, and the like—the general aim being to create an environment for the patient in which emotional strain would be at a minimum.

For the most part social work in psychiatric hospitals is still con-

[15] Adolf Meyer, *op. cit.*, p. 196.

[16] Adolf Meyer, "The Role of Mental Factors in Psychiatry," *American Journal of Insanity*, LXV (1908), 46–48.

ducted in this way. The social worker is the psychiatrist's aide and carries on the work under his direction. Emphasis is put upon doing things for the patient, with the planning largely in the psychiatrist's hands. The desires of the patient and those who live with him are taken into account, of course, but chiefly because it is necessary to secure their co-operation. The objective of the work is the patient's welfare but, as in the corresponding kind of medical social work, it is held not only that the doctor knows best but that pressure and influence are justifiable means to use in effecting the medically desirable changes.

The alternative point of view—that even psychotic individuals, especially those who are sufficiently recovered to leave the hospital, can be best helped by working with them rather than on their behalf —developed largely out of the psychiatric theory that paid more attention to the dynamics of human psychology. It has influenced both the information-gathering and the social treatment aspects of psychiatric social work.

According to this school of thought, the social worker interviews patients (if they are sufficiently in touch with reality) and their relatives not only to collect data from which the psychiatrist can make an estimate of capacities and map out a treatment program but also to give the clients an opportunity to discuss their social difficulties and clarify their plans. This is not to say, of course, that the psychiatrist, under this conception of the work, does not want to know certain facts about the patient's early life and habits and general history. It is held, however, that a social worker can often secure the most important information on these points through interviews that are directed toward helping the informants work out the part they shall play in the situation.

In addition, and more important, dynamic psychiatry (the psychiatry of interpersonal relations) does not put much reliance for diagnostic purposes on the social facts secured from closely directed interviews. It is held that the social worker can contribute chiefly to diagnosis through gaining some insight into the emotional relationships that probably obtained in the patient's childhood home and that still color his relationships with people. For this school of psychiatry, as was noted above, does not consider "social" and "interpersonal" equivalent terms, nor does it hold that cures can be effected by showing patients better ways of getting along in organized groups. Case work and psychotherapy are accordingly regarded as independent ap-

proaches to a patient's problems, and the social worker does not so much work under a psychiatrist's direction as contribute his skills in an independent professional capacity.

Typical case work services in mental hospitals

In spite of these differences in theoretical orientation, there is considerable similarity in the case work services afforded by most mental hospitals. The social worker's part in work with patients, after the initial interview with relatives, is often limited to the parole period, though in some hospitals he may initiate contact with patients earlier if they are not too seriously ill. In the latter case, the work is often fairly similar to that of medical social workers, being concerned with alleviating anxiety about practical matters—such as family income and care of children, arranging for contact with relatives, helping with decisions about staying in or leaving the hospital if the patient has any choice in the matter, and so on. Helping patients to straighten out these matters often results in their being able to use the hospital's facilities to better advantage.

In this connection it should be noted that many patients in mental hospitals are not nearly so unapproachable or so remote from their former life and what is going on about them as is popularly believed. Among the striking findings of modern psychiatry is that which shows that there is meaning in even the most bizarre of psychotic patients' utterances, and that even patients who are the most silent and withdrawn can later describe much of what was said and done to them. Most patients, even in hospitals, are not of these extreme types, however. Many of them can discuss fairly rationally their worries and desires about practical problems and, like patients in a medical hospital, become better able to profit from treatment when their home affairs are set right.

An important difference between these patients—both in the hospital and on parole—and the clients of other social agencies, however, is that they are usually less able to initiate contact with a social worker and less able to take full responsibility for moving ahead toward the solution of their difficulties. In addition, the case worker has to keep in mind the peculiar characteristics of the patients' psychological disorders, for these may seriously affect the character and feasibility of their plans.

Case work services to relatives of patients, both during the time the patient is in a hospital and during the parole period, may also be

afforded. It is coming to be recognized that since these people do not request treatment for themselves when they bring a patient to a hospital, it should not be the social worker's objective to produce change in their personality traits. It is found, however, that relatives usually have numerous questions about the patient, the hospital, and the nature of mental disorders that they want to discuss with a representative of the hospital, and they are likely to be willing to accept the social worker as that representative. Through these interviews—in which the emphasis is put upon giving such information as is in the social worker's possession, offering assistance in making arrangements about various practical matters, and helping the relatives plan for the patient's later care—the relatives often are able to work out some of the difficulties that have beset their relationships with the patient and, sometimes, to begin to feel differently toward him. In the course of such interviews, also, the social worker is able to evaluate the favorable and unfavorable features of the home situation and so provide the psychiatrist with data on which to base recommendations for the patient's posthospital care.

As to case work with patients during parole, whether or not that is offered is usually dependent upon the individual psychiatrist, although in some hospitals social workers routinely interview patients as they report to "parole clinics" or keep in contact with them during the parole period. If patients are specially assigned to social workers, it is usually for help with regard to specific social aspects of their lives—job placement, the finding of a suitable home, problems of family relationships, recreation, and the like. Here, too, it is coming to be accepted that the social worker's usual objective is to help the patient to participate actively in the solution of his social difficulties, although the extent to which this can be accomplished will vary with the state of the patient's mental health. Since many patients are still far from well adjusted emotionally, it is clear that unusual skill and much knowledge of psychology are necessary in working with them.

In addition to the usual services of mental hospitals, "family care" for mental patients has recently been instituted in some centers, for it has been found that some patients, even if they are definitely psychotic, can adjust better in a carefully selected and supervised home than in a hospital. The finding of suitable homes and the supervision of patients in them is entrusted largely to social workers, although, of course, arrangements are made for psychiatric checkup or consultation as the individual case requires. In this work, as in the other social

work services in a mental hospital, there is also possibility of considerable divergence in practices, ranging from routine follow-up work to obtain data for the psychiatrists to highly technical case work with patients and foster families in regard to the problems they encounter in this unusual social situation..

Case work in a psychiatric hospital thus has much in common with case work in other settings, but it also has characteristics peculiarly its own by reason of the problems with which it deals. One of the chief of these differences is traceable to the fact that it is concerned not only with helping patients and their relatives to use the organized services of a hospital (in the sense of resolving their anxieties about it and about other problems that stand in the way of undertaking treatment) but with working out a favorable mode of life during the parole period. In other words, case work with these patients involves their problems with regard to not one but possibly many organized groups.

Closer consideration of the work will show, however, that the case worker's services with respect to problems of family life, employment, recreation, and the like, come into play only by reason of the patient's use of the hospital and are related to his treatment there, just as case work services in medical hospitals, schools, and courts are related to the primary functions of those institutions. To be more specific, a case worker attached to a psychiatric hospital offers help with regard to problems of family life and employment only in so far as they are related to the patient's mental health, just as a case worker in a school limits his concern with similar problems to those aspects that are related to a child's school difficulties. That the psychiatric social worker devotes more attention to the problems that lie outside the institution with which he is connected is due to the fact that mental ill-health is often all-pervasive, so that help in many social areas is required if the hospital's and the psychiatrist's own contributions are to be rendered effective.

An example of case work with a mental hospital patient

The way such help may be given to a mental hospital patient by a case worker who bases her practice on the theory of working with the patient rather than arranging his life for him is illustrated by the following record of case work with a paroled patient. It will be noted that although psychological problems were discussed, they all concerned the patient's relationships with people in social groups (family, work, recreation) and not the causes of his malfunctioning.

Case 31 [17]

George, aged nineteen, had been admitted to the hospital following a long period of seclusiveness, apathy, indifference toward his surroundings, refusal to eat or leave his bed. The history revealed schizoid trends from early childhood. His mother, highly emotional, aggressive and garrulous, had always dominated the family, so that all were fearful of and dependent upon her. George was disparaged in comparison with his older brother, a graduate of the Harvard School of Business Administration. At his discharge, eight months later, there was little changed noted. Though pleasant and co-operative, he had remained quietly resistive to psychiatric treatment. It was thought that a dearth of inner emotional content accounted for his lack of productivity. Diagnosis upon discharge was dementia praecox, simple type—much improved. The psychiatrist referred George to social service for concrete help, requesting that specific recommendations be carried out—namely, camp placement, job, recreational activities.

After George returned from camp, the worker visited him at home. George showed only a passive interest. After two letters were sent to him, he appeared at the office on coercion from his mother, who had telephoned in a panic. She insisted George be rehospitalized, for he had regressed completely and she feared he might kill her.

The picture George presented in his first office interview—that of a withdrawn, fearful, suspicious young man, dejected, impassive, eyes downcast—was unchanged for several subsequent interviews. His answers to questions were monosyllabic and barely audible. The case worker kept him for about half an hour, filling silences with superficial chitchat, injecting humorous remarks and general subjects of interest. Throughout she conveyed warmth and friendliness.

George agreed to return on a weekly basis for one hour. For the next few weeks the worker followed the same procedure but made some references to concrete plans. On occasion she put into words his thoughts of distress. He was surprised and pleased. Gradual change in George was noted. He made some effort to speak in short sentences. He cast fleeting furtive glances toward the worker and smiled on occasion; on greeting and leaving her his handshake, limp before, was now firm, and he tried to prolong the interview. This period for George was one of testing out the worker's interest in him as a person. As yet he was unable to mobilize himself.

By the end of two months George showed less preoccupation, at times burst out with some spontaneous comment, sat erect or else lounged com-

[17] Rae Levine Weissman, "Case Work Note Book," *Social Work Today*, VIII (March, 1941), 21–22.

fortably in his chair and met the worker's eye. He surprised even himself by once laughing heartily. He asked about resources for vocational training and job possibilities. He investigated leads suggested by the worker and gathered material which he brought back to go over with her. At this point George was ready to try out some of the worker's suggestions and assume some responsibility in working out his problem.

He selected a school and enrolled in it. During the four months of his attendance at school, material for discussion in the interviews was provided by his activities there (daily incidents, observations about the instructor and student body, etc.) as well as by his spontaneous confidences about his fear of people, lack of confidence in himself, feelings of inferiority, feelings of hostility toward his mother—all of which he wanted to overcome.

His moods fluctuated. At times he was depressed, tense, and withdrawn. On many occasions he remarked it was funny how the worker could express just what his thoughts were and how he felt. At these times the worker traced his progress thus far, which always served to encourage and keep him going.

He began to attribute his feelings to his relationship with his mother, drawing upon literature and illustrating in dramatic ways his growing awareness of himself and his illness. Although he was irritated at home he withdrew, being always too fearful to retaliate. Concomitantly, hostile feelings toward his mother for her crushing dominance and openly sadistic attitudes surged up. The worker helped him toward an acceptance of people as they are and of himself as an individual with assets, one who could find satisfaction outside his home.

Weeks of talk about old friends resulted in a gradual renewal of friendship with some. Discussion of books, movies, and current events stimulated interest so that he brought such topics and actual experiences in social relationships into the interviews. In one interview he expressed jubilance at standing his ground in a dispute with an instructor while frightened at his own self-assertiveness. He said he was able to do this because he felt the worker had confidence in him. On another occasion he was gleeful when he described a quarrel which ended in a fist fight with his brother, in which he came out the victor. He contrasted this with his previous pattern of taking insults.

George was also beginning to ignore his mother's attempts to dominate him. He began to refer vaguely to possibilities of leaving home but recognized that he was not yet ready for this step. He withdrew from school after careful consideration and landed a temporary job through perseverance and ingenuity. He was delighted with his ability to stand up to the employment agency and recognized his success as growth in self-confidence. He began to throw out hints of desire to associate with girls and to learn

to dance. When the family moved away from the grandparents' home, George remained, resisting his mother's decision to leave with her. He discussed this separation as a difficult but necessary step toward independence and contrasted his action with that of his brother who, for all his superiority, had docilely submitted.

During this period George was beginning to understand more about his problem and was taking more responsibility toward its solution. He was also taking over some of the worker's confidence and acceptance of him, and testing himself out in relationships outside the clinic. Misgivings and fears, though diminished, were still present, as when he lost his temporary job. But he did not require as much reassurance as formerly. His survey of his progress so far, with continued encouragement and expressions of confidence in him from the worker, helped him to go on.

With approach of summer George weighed the comparative advantages of a farm job over enrollment in the Civilian Conservation Corps. Several interviews were devoted to discussion of a choice, George bringing up all his fears in connection with the pressure and demands of CCC, such as jibes of other men, discrimination on racial grounds, and so on, his question being, would he be able to "take it." After evaluation of his progress to date, he decided on CCC, feeling that he was ready to try the experiment of going into completely strange surroundings and standing on his own feet. He went to Montana, where he remanied six months.

George's letters from camp were few but friendly in tone, with details of his activities. On his return, he came voluntarily to the office and spontaneously related his experiences. He had already secured an evening job on his own and was looking for a day job. His general appearance and spontaneity in discussion of plans and social contacts attested to the maintenance of gains.

Case Work in Mental Hygiene Clinics

The preceding case equally well illustrates one aspect of social work in a mental hygiene clinic; in fact, all of the work there described was done through a clinic of the hospital to which the patient had earlier been committed. Most clinic patients, however, have not previously been hospitalized, nor is it usual for the whole of their treatment in a clinic to be left to the case worker. That such was the procedure in this case was due to the fact that the patient had been treated by a psychiatrist in the hospital and was referred by him to the case worker for help in making a social adjustment.

There are other differences between in-patients and out-patients that may affect case work in a clinic setting. For one thing, a greater

proportion of patients come to a clinic on their own initiative, or at least are not accompanied by relatives or others who are responsible for them. Then, too, their personality maladjustment is likely to be less extreme than that of patients in a mental hospital. Instead of being "insane," these patients are very nervous or peculiar or they have vague physical complaints or seemingly unwarranted fears or they feel unreasonably worried and depressed. The following descriptions of symptoms of a series of patients in a typical mental hygiene clinic may make clearer some of the kinds of disorders such clinics treat.

Example 1.—Girl of eighteen referred to the clinic by a family welfare agency because of complaints of pain all over her body, fear of going insane, fear of dying, increasing physical disability, and general emotional imbalance.

Example 2.—Girl of twenty-one who was fearful of going out of the house because she thought buildings might fall down on her and who complained of severe headaches for which no physical basis could be found.

Example 3.—Boy of nineteen who was oppressively discouraged, insecure, and extremely shy and sensitive. He said he continually wanted to run away and was greatly worried because he had a heart murmur and generally poor health.

Example 4.—Woman, thirty-eight years old, had for some time been imagining that people were always talking about her although she realized that this was not at all likely. She felt so upset and depressed about these feelings she could not bring herself for several months to talk to a doctor about them.

Example 5.—Man of thirty-four whose wife complained to a hospital social worker about their difficult marital situation. He was very jealous of his wife, resented the help she received from her family during her illness, and thought that the relatives were trying to take her away from him.

Example 6.—Man, twenty-four years old, referred by a physician in the factory in which he worked because he was depressed, made threats of suicide, and claimed his whole disposition had changed.

Example 7.—Woman, fifty years old, referred by a family welfare agency because of her fear of being shut in a room and of going to new places, her constant, unwarranted worry about financial matters and about what she called her mother's peculiar behavior.

Example 8.—Man, thirty-three, referred by the Red Cross because he was nervous, felt "twitchy" all the time, and had spells in which he thought he was going to faint.

With patients of these types somewhat less emphasis is put on the gathering of historical material as a basis for the psychiatric diagnosis, although in many clinics this is still one of the chief activities of the social worker. On the other hand, clinic social workers usually have more to do with patients' problems of everyday living than do the hospital social workers. Much of this work consists of putting patients in touch with other social and health agencies—such as those that supply financial assistance, recreational and occupational services, medical treatment or convalescent care, and so on—or encouraging patients to use the services of those agencies. As with hospital patients, however, psychiatrists often want social workers to try to modify the adverse attitudes of the people with whom the patients live and to explain to them the nature of the difficulties and the psychiatrists' prescriptions for the patients' care. And, similarly, there is often case work to be carried on with the patient himself, much of which is designed to reassure, encourage, support, and offer counsel to him.

Types of mental hygiene clinics and their case work services

Mental hygiene clinics differ among themselves in structure and services in ways that may affect the conduct of case work in them. Clinics of one kind or another have been in existence for about fifty years, the earliest having been designed for the "treatment of mental diseases in their early or incipient stages occurring among the poor and indigent."[18] This financial restriction, which is still retained by some privately subsidized clinics, parallels the usual distinction between clinical and private practice of medicine. Many clinics, however, operate under the auspices of state mental hospitals and are thus usually available to all citizens as a public service.

Under the influence of Adolf Meyer's conviction that state mental hospitals should serve as mental health centers for the surrounding communities and concern themselves not only with the care of the frankly psychotic but with mental health in all its aspects, New York and Massachusetts about 1914 set up state-wide mental hygiene pro-

[18] From the "statement of purpose" of the Pennsylvania Hospital Clinic at the time of its founding in 1885. This is said to have been the first out-patient clinic for the mentally ill.

grams. Out-patient clinics were added to all state hospitals, and "traveling clinics," operating out from the hospitals, were held in numerous towns and cities. Other states later followed suit, though usually with less ambitious programs.

These first clinics had several purposes—the early recognition and treatment of mental disorders, "education" of the communities in regard to the nature and causes of mental disturbances and the principles of mental health, and the maintenance of contact with patients on parole from the hospital. Later, distinctions among the various categories of patients were made in some states. In New York, for instance, separate clinics are conducted for patients on parole, other adults, and children. It is usual to confine the term, mental hygiene clinic, to the clinic that serves adults who are not paroled hospital patients, and it is that type of clinic that we have chiefly in mind in the following analysis of case work services.

Even with that restriction there are structural and procedural differences among clinics that affect case work in them. The general categories are the following: clinics conducted as departments of general hospitals; out-patient departments of psychopathic hospitals and of other mental hospitals; traveling clinics under either of the latter auspices which hold sessions at scheduled intervals or on request in communities other than those in which the hospital is located; clinics conducted by departments of cities, counties, states, or the federal government; and privately financed clinics with no hospital affiliation. Many of these clinics serve children as well as adults, but analysis of child guidance work will be postponed until the next chapter.

On the basis of number of communities served, the traveling clinics of state hospitals constitute the largest proportion of mental hygiene clinics. The limited amount of time allotted to any given community greatly affects both the psychiatric and the case work services such clinics can offer. The typical arrangement is to hold clinic sessions once a month in each community selected as a center, a plan that results in the clinics averaging less than an hour a week of psychiatric service per community.[19] In consequence, the work of these clinics is very largely confined to single interviews with patients for

[19] Helen Leland Witmer, *Psychiatric Clinics for Children,* The Commonwealth Fund, New York, 1940, pp. 108–10. See pp. 63–242 for detailed analysis of the work of state-financed clinics. The study is confined to those clinics that accept children as patients but applies almost equally to those confined to adults.

diagnostic purposes, and the psychiatrists seldom undertake treatment or assume responsibility for any kind of "follow-up" work.

The majority of these clinics have social workers on their staffs, but their duties vary with the plans under which the clinics operate. In many, social workers perform only the duties of clinic manager, arranging appointments, putting in order the social histories that are submitted by the social agencies that refer patients to the clinic, and interviewing patients or those who accompany them for additional data which the psychiatrists will need. If there is no psychologist on the clinic's staff the social workers may give mental tests. They may have the duty of explaining the psychiatrists' findings to the referring parties—relatives, social agencies, courts, or schools. In a few clinics they give some help to local social workers in carrying out the psychiatrists' recommendations. In only a very few state hospital clinics is case work with relatives or patients carried on.

Traveling clinics that do offer psychiatric treatment are likely to be set up along child guidance lines (the details of which will be described in the next chapter) and to have at least as many and perhaps more social workers than psychiatrists on their staffs. Such clinics serve rather restricted geographical areas; hence it is possible for the social workers to give time to visiting patients and their relatives on days in which the clinic is not in session. Under such a plan case work may be carried on by the clinic workers instead of being left to other social agencies.

The kinds of activities in which case workers on the staffs of these clinics engage vary somewhat from place to place, depending in part upon the theory of psychiatry that dominates the work of the clinic as a whole. If the psychiatry is of the Meyerian type, case work is likely to be concerned chiefly with putting the psychiatrists' recommendations into effect (finding jobs and recreation resources, arranging for financial assistance, attempting to change relatives' attitudes, and so on) and securing reports of progress. It may, however, be of the kind described in the case above, where emphasis is put upon helping both patients and their relatives to work out their own solutions to problems that are associated with the illness and encountered in social relationships.

Clinics conducted by central departments of governmental units do not differ in their practice sufficiently from these state hospital clinics to warrant detailed description. The departments sponsoring clinics include those of mental disease or mental hygiene, health, welfare, and

education. The staffs of the clinics may be partially recruited from mental hospitals or may be independently provided. In the main, such clinics serve children rather than adults, the programs of Illinois and California, for instance, having originated as attempts to forestall delinquency rather than mental disorders. For the most part, state clinics afford even less psychiatric service to the communities than do the majority of mental hospital clinics, and case work is similarly restricted.

A very different clinical setup is typically provided by psychopathic or general hospitals. To afford facilities for psychiatric treatment is the chief purpose of many such clinics, although much purely diagnostic work is also carried on. In such clinics the medical point of view is likely to predominate, case workers are usually outnumbered by psychiatrists on the staffs, and only certain selected cases are brought to their attention. The position of clinic manager may be held by a case worker, the duties of this position corresponding somewhat to those of the admissions officer for the in-patients of a hospital. Otherwise case workers' contacts with patients usually occur only at the request of psychiatrists, and the work to be performed is usually outlined by them. It consists, in the main, of obtaining further data about patients' social situations, putting patients in touch with needed social facilities, acting as liaison agents between psychiatrists and social agencies or others who referred the patients to the clinic, and occasionally carrying on case work with patients who are judged to need friendly support and interest rather than psychiatric treatment.

Variations in the philosophy and practice of case work

It is clear that from what has been learned about case work under other auspices that a mental hygiene clinic gives scope for the practice of case work of the most varied kinds. Case work may be carried on in a very paternalistic manner, on the theory that the doctor knows best what a patient needs, and all efforts must be made to bring about the recommended environmental changes, whether the patient and his relatives really desire them or not. When case work is practiced in this manner, the patient may find himself routed to an X-ray examination and a convalescent retreat in the country, a visiting housekeeper installed in his home, his children brought to the clinic for psychiatric and physical examination, arrangement made for his wife to join a club in a settlement house, and his relatives notified of his condition. As has happened throughout the history of social work, such practices may produce favorable results in some cases (some people, particularly

some neurotics, like to be "bossed" and cared for), but as a general matter it is now believed that what success is achieved by such case work is usually in spite of rather than because of the methods used.

At the other extreme, case work in mental hygiene clinics may approximate psychiatric treatment, especially that aspect of case work which is concerned with improving the patient's family environment. It has been pointed out that the "psychiatric social worker is called upon not only to find the new avenues of employment, recreation, education, and improved living conditions recommended for the patient, but to help those people surrounding the patient to understand and accept these needs: the mother should let the patient take more responsibility; the father must not object to the patient's wider social life; the parents must relinquish their cherished goal that this patient go through college; the father should find a job and earn enough to afford a cheerier apartment in a better neighborhood; the argumentative parents should at least avoid carrying on their quarrels before the children; the mother must not confront the patient before his friends with her endearing terms, 'Sweetie-pie' and 'Angel-face,' if he is to get well. These and thousands of similar or more subtle situations confront the worker who attempts to cope with the patient's environment."[20]

Since much of such behavior and attitudes on the part of parents and relatives is thought to be due to their own neurotic disturbances, some case workers have attempted to adapt psychiatric treatment methods to their work with relatives. The methods used are identified by such names as "insight therapy," "suggestive and interpretive therapy," and "attitude therapy." They are held to belong to case work because attention is centered upon the client's social relationships, but it is sometimes difficult to distinguish them clearly from psychiatry except on the basis of "intensity" and "depth" of treatment.

Within a clinical setup, however, case work in harmony with present theories of client responsibility may also be carried on, especially if the psychiatrists see the need for joint work in regard to patients' problems. It may be a routine part of procedure that the case worker interview the patients' relatives, especially if they accompany the patients to the clinic. The chief purpose of these interviews, however, is not so much to gather additional information as to give the

[20] Leona M. Hambrecht, "Psychiatric and Social Treatment: Functions and Correlations," *Psychiatric Quarterly* (July, 1937). Reprinted in *Readings in Social Case Work*, edited by Fern Lowry, Columbia University Press, New York, 1939, p. 482.

relatives an opportunity to discuss the problems that the patients' difficulties create and to give them help in working toward a solution. Then, concurrently with psychiatric treatment, a case worker's services may be offered to patients to help them with their problems of social life in the manner of the case described above. It is more usual, however, for case workers to carry on interviews with patients only after psychiatric treatment has ceased, or at least to limit their contacts during that part of treatment to very practical matters. Whichever of these plans is followed, however, the distinguishing characteristic of this kind of case work is its basic assumption that even a disturbed individual can be helped to meet his social difficulties only if his participation in planning and his assumption of some responsibility can be secured.

If case work of this nature were to be a routine part of a clinic's services, it would be necessary for clinics to employ more case workers than is now customary. Some few clinics, most of them independent of hospitals, are so staffed, and in them work is carried on in somewhat the manner of a child guidance clinic. The essential difference in point of view between these and the usual mental hygiene clinics is that case work is not regarded as a means through which the environmental situations of certain selected patients is altered but as a service that is likely to be needed in the majority of cases to help patients make the best use of psychiatric treatment and effect their adjustment to social situations.

Suggestions for Further Study

Medical social work

American Association of Hospital Social Workers, 18 East Division St., Chicago, Ill., *The Functions of Hospital Social Service,* 1930; *Medical Social Work: a Study of Current Aims and Methods,* 1934; *Some Aspects of Social Case Work in a Medical Setting,* 1940.

These two monographs and a book prepared by the Committee on Functions (the latter two being written by Harriett M. Bartlett) are the most important publications in the field. The last one, in particular, gives a detailed account of the theories, working methods, and present problems, and contains interesting and graphic case illustrations.

Cannon, Ida M., *Social Work in Hospitals,* Russell Sage Foundation, New York, 1923.

A standard textbook for many years; useful for illustrating the point of view which dominated the field in the 1920's and earlier.

Cockerill, Eleanor, "The Use of Current Case Work Concepts Where There Is Physical Illness," *Proceedings of the National Conference of Social Work* (1939), pp. 304–14.

An abstract and analysis of a case record to show the kinds of feelings patients may have in regard to illness, the influence of these feelings on their ability to use medical care, and how a case worker may be of assistance to patients.

Reynolds, Bertha, "The Adaptation of the Newer Concepts of Generic Case Work to Medical Social Work," *Bulletin of the American Association of Medical Social Workers,* X (1937), 81–98.

The chief concepts that social case workers have derived from dynamic psychology and a discussion of their applicability to medical social work. Detailed discussion by Harriett M. Bartlett.

Thornton, Janet, and Marjorie Strauss Knauth, *The Social Component in Medical Care,* Columbia University Press, New York, 1937.

A research study about the extent of interrelatedness between medical and social factors in illness, and a description of the social work carried on with an unselected series of patients.

Towle, Charlotte, "Social Content of Work for Crippled Children," *The Crippled Child* (1937), pp. 9–13.

Discusses the application of current case work concepts to case work with crippled children and their parents.

White House Conference, *The Handicapped Child,* D. Appleton-Century Company, New York, 1933.

Survey of the extent of physical and mental handicaps among the U.S. child population and of the organized services through which assistance is afforded.

Psychiatric social work

Beers, Clifford, *A Mind That Found Itself,* Doubleday, Doran & Company, New York, 1935.

The book with which the mental hygiene movement originated. It is of special value in showing, on the basis of personal experience, the extent to which even severely psychotic individuals retain understanding of and interest in what is being done to and for them.

Crutcher, Hester B., *A Guide for Developing Psychiatric Social Work in State Hospitals,* State Hospitals Press, Utica, N. Y., 1933.

A description of the role of a social worker in a mental hospital, the necessary qualifications for carrying on this work, and an analysis of procedures.

Deutsch, Albert, *The Mentally Ill in America,* Doubleday, Doran & Company, New York, 1937.

A detailed history of the work with mental patients, including some descriptions of changing psychiatric theories.

French, Lois Meredith, *Trends in Psychiatric Social Work,* Commonwealth Fund, New York, 1941.

Largely a statistical analysis but contains some description of changing theories in psychiatric social work.

Graves, Marion, "Some Aspects of Psychiatric Social Work with Adults in a Mental Hospital," *Newsletter* of the American Association of Psychiatric Social Workers, VIII (1939), 33–37.

Description of the services of a psychiatric social worker in a mental hospital and how they are carried out. Two good case examples.

Hambrecht, Leona, "Psychiatric and Social Treatment: Functions and Correlations," in *Readings in Social Case Work,* Fern Lowry, editor, Columbia University Press, New York, 1939, pp. 480–509.

McCreery, Agnes, "Dynamic Possibilities for Psychiatric Social Work in a Mental Hospital," *Newsletter* of the American Association of Psychiatric Social Workers, Tenth Anniversary Number (1940), pp. 6–11.

Potter, Howard W., "Thirty Years of Psychiatry," in *Readings in Mental Hygiene,* Ernest Groves and Phyllis Blanchard, editors, Henry Holt and Company, New York, 1936, pp. 48–55.

Witmer, Helen Leland, *Psychiatric Clinics for Children,* Commonwealth Fund, New York, 1940, pp. 1-40.

Chapter XVII

SOCIAL WORK IN CHILD GUIDANCE CLINICS

Child guidance clinics have served as laboratories in which many of the theories and practices basic to present-day social case work were worked out, for it was there that psychiatrists and case workers first collaborated on a basis of professional equality. In these clinics case workers learned to understand human psychology better, as it affects both individual behavior and the process of giving and taking help with difficulties encountered in everyday living; and—after the flush of the first enthusiasm—it was there that they first clearly worked out the implications of modern psychiatric theory for social work practice.

The need for clarification was occasioned by the confusion engendered in case work by the psychiatrists' demonstration that many of the difficulties that human beings encounter in getting along with each other are due to personality maladjustment. It seemed a logical derivative of that finding that problems of family life, conflict with the law, attitudes and behavior toward school, jobs, and use of medical facilities could be met only by bringing about improvement in mental health. Hence as rapidly as the psychiatric point of view engaged the attention of social workers the dilemma of how to make use of this new knowledge arose. In child guidance clinics these problems were first met and first solved. Though leadership in case work thinking is now widely distributed among many kinds of agencies, there was a period when it seemed to come chiefly from child guidance clinics. A close analysis of child guidance case work seems warranted, therefore, because of both its historical and its theoretical importance.

Child Guidance Clinics: Origins and Characteristic Features

Child guidance clinics are much less numerous than their influence on case work would imply. A survey by the National Committee for Mental Hygiene in 1935 revealed 617 psychiatric clinics that admitted

children as patients, but many of these did not have the requisite staff composition or offer the services which that organization deems necessary for child guidance. A child guidance clinic typically has psychiatrists and social workers in a ratio of about one to three and usually has one psychologist for every two psychiatrists. Two hundred and thirty-five clinics of that kind were reported in the 1935 survey, the majority being located in large cities. The number of clinics that offered typical child guidance services was, however, much smaller.

This staff composition is not a formal criterion but one that is intimately linked to the work to be done. To revert to our earlier method of institutional analysis, the standards regarding personnel and their activities derive from the technical rules and objectives on which an institution is based. As these change (for instance, if it is deemed necessary to carry on psychiatric treatment with even very young children, or if mental testing is not thought to be needed in all cases), the staff composition of a child guidance clinic will change accordingly.

As to the services of a child guidance clinic, they will be described in more detail below. Two points of major differentiation between such clinics and most other psychiatric clinics should, however, be noted here. First, treatment—as contrasted with diagnosis or consultation—is the major service such clinics offer; and, second, case work is initiated and carried on simultaneously with psychiatric treatment and is regarded as a parallel service required in most cases. In other words, case work is not introduced on the basis of the psychiatrist's perception of need for it in individual cases, nor is it carried on under his direction, but it is a service routinely offered at the time of a parent's application for assistance, and the feasibility of undertaking treatment of a child is frequently judged by the parent's attitude toward that offer. All of this makes the work of a child guidance clinic considerably different from other forms of psychiatric service for children, especially in its case work aspects.

The explanation of the characteristic features of child guidance clinics is to be found in their historical development and in the theories that underlie their work. They developed out of the convergence of two somewhat independent lines of research and practice. On the one hand, there was Meyer's concept of psychiatry and psychiatric social work described above. Added to it was the mental hygiene movement. This latter began in 1909 as a program for improving the public's understanding of mental disorders and the care and treatment of psychotic individuals, but it became increasingly concerned with the

mental hygiene aspects of various social problems: poverty, feeblemindedness, crime, and industrial inefficiency in particular. Research into the lives of people involved in such difficulties led to the conviction that social maladjustment is usually due to faulty emotional development which has its roots in childhood.[1] It was expected, therefore, that not only mental disorders but numerous forms of social maladjustment could be forestalled through the spread of mental hygiene information, the improvement of environmental conditions, and an increase in psychiatric treatment facilities for children.

On the other hand, at the same time that the mental hygiene movement was getting under way, Dr. William Healy was beginning his five-year study of offenders coming before the Chicago Juvenile Court, which resulted in his epoch-making book, *The Individual Delinquent.* His careful studies of individual children led to the conclusion that delinquency is due to a complex of physical, psychological, and sociological factors that must be carefully evaluated in each case before the reasons for a child's acts can be understood and treatment for him planned. Such an evaluation, obviously, could be made only by experts in the various fields. Hence, in the clinic that was set up in connection with the court, physicians were employed to examine children for their physical assets and liabilities, psychologists to test their intellectual level and aptitudes, and psychiatrists to study the character of their "mental life," while from probation officers and social workers in various agencies the facts regarding their home and neighborhood conditions were secured. On the basis of this evidence the staff members, under the psychiatrist's leadership, jointly determined upon a treatment plan to be recommended to the court. Healy directed this work in Chicago for some years and then went to the newly established Judge Baker Foundation in Boston, where fairly similar activities in connection with the juvenile court of that city were undertaken. In the meantime other clinics for juvenile delinquents had been set up in Ohio and Michigan.

When, therefore, the National Committee for Mental Hygiene and the Commonwealth Fund decided in 1921 to enter upon a clinical program to demonstrate the value of psychiatry in prevention of delinquency, they were influenced by developments in both psychiatric

[1] For a statement of this point of view see Frankwood E. Williams, "Finding a Way in Mental Hygiene," *Mental Hygiene,* XIV (1930), 225–57. For a general historical account, Adolf Meyer, "The Birth and Development of the Mental Hygiene Movement," *Mental Hygiene,* XIX (1935), 29–37.

and criminological theory and in clinical practice in these two fields. The emphasis in the demonstration clinics which they set up in a number of cities was on the "adequate understanding and treatment of the personality difficulties of children" in the belief that this offered "the possibility of early discovery and prevention of delinquent trends." [2]

In offering treatment rather than only study and recommendations, these clinics went beyond those that Healy directed, but in composition of staff and in concept of material needed for diagnosis they were greatly influenced by his work, as well as by that of Adolf Meyer and others in psychopathic hospitals. From the latter was taken over the practice of having psychiatric social workers on a clinic's staff, but it was from the clinics connected with courts that the plan for "teamwork" came, a plan that is in such striking contrast to the practices of most psychiatric clinics, where the services of physicians, psychologists, and social workers are used only at the psychiatrist's discretion.

This sense of need for teamwork had several bases. The theories in regard to the multiple causation of the personality disorders of the mentally ill and delinquents have already been noted. In the case of delinquents the conclusion was readily drawn that treatment must take these numerous factors into account and that psychiatric treatment must routinely be paralleled by work aimed at improving environmental conditions. In addition, these clinics were set up not only in order to treat patients but in order to show courts, schools, and child-caring agencies what psychiatry, psychology, and psychiatric social work had to contribute to their own work with delinquent or "pre-delinquent" children.

It was recognized from the start that the clinics would probably not be able to meet the demand for service, and a major objective of the clinical program was to teach other professional workers, especially those in social agencies, how to deal with problem children. To this end, not only the clinics' social workers but representatives of the schools, courts, and social agencies from which the patients came were drawn into the treatment planning or were at least made copartners with the clinic in its treatment efforts. Later refinements of theory have somewhat altered this plan (it has become recognized, for instance, that child guidance is a very specialized kind of work that cannot be farmed out to others who have different duties to perform),

[2] *Commonwealth Fund Program for the Prevention of Delinquency, Progress Report,* Joint Committee on Methods of Preventing Delinquency, New York, 1926, p. 7.

but in the meantime the social-psychiatric as distinguished from the purely psychiatric point of view became firmly accepted in child guidance circles.

Soon after the demonstration clinics were established it was found that child guidance could be profitably used not only by some delinquent children and by some who seemed likely to be on the way to becoming delinquent but also by children who showed many other sorts of behavior and personality maladjustment. Consequently, clinics began to accept as patients children who were considered too shy and retiring, those who were regarded as queer, the nervous, the ones with tics and other peculiar mannerisms, those who did not get along well with other children, those who had various kinds of "bad habits," as well as the outwardly rebellious and pugnacious who might be looked upon as potential delinquents.

Then, too, clinic workers began to see that delinquency was often due to causes that lay outside the ability of a clinic to cope with. For instance, the pathology of social relationships in a delinquent's family or neighborhood situation might be so extreme that placement of the child in an institution would seem the only solution. Again, the child himself might be so markedly abnormal, either in his intelligence or emotional make-up, that he would not be amenable to either psychotherapy or social treatment. In other cases, delinquency might represent normal behavior in the group in which the child lived, so that neither he nor his parents would have any desire or incentive to change their mode of life. Child guidance clinicians accordingly began to alter their conception of who should be their patients, and they gradually came to the conclusion that the desire of a child or his parents for help of the kind of clinic could offer, rather than the child's overt symptoms or somebody else's sense of his need for treatment, was their best criterion for the selection of cases. By this conclusion clinicians do not mean that they have no assistance to give to courts, schools, and social agencies in evaluating the role of emotional factors in the behavior of children in their care. In so far, however, as the clinics specialize in treatment rather than diagnosis they are inclined to limit their intake largely to cases in which the parents (or the children, especially if they are adolescents) really want their help.

It was many years, however, before clinic workers came to so definite a conclusion and based their intake policy upon it. In the meantime child guidance in general and the case work aspects of child

guidance in particular went through several phases of development that paralleled rather closely some of those already described in other fields of social work. In fact, as was said at the outset, some of the changes in other fields were partially attributable to case work theories developed through work in child guidance clinics.

Changes in Conceptions about Case Work in Child Guidance Clinics

The earliest conception of the case worker's role in a child guidance clinic had much in common with that which characterized the rest of mental hygiene work. It was—and still is—customary in child guidance clinics to have a case worker discuss with each applicant the nature of the child's difficulties and the feasibility of psychiatric study and treatment for him. Some requests were withdrawn or rejected immediately on the basis of the case worker's description of the clinic's area of work; the others were usually presented to the staff for consideration unless it was obvious that the case was the kind to be automatically accepted. In those days—and today to a large extent in many clinics—referrals came mainly from social agencies, schools, and courts, with only a small proportion of requests for help coming directly from parents.

Once a case was accepted, study of the problem was undertaken. The child was examined by the clinic's psychologist, pediatrician, and psychiatrist, and the social worker investigated the home, school, and neighborhood situation, either directly or through material already known to the referring social agency. The next step in procedure was the "initial staff conference," at which the collected data were pooled, a diagnosis of the situation made, and a treatment plan formulated. To the social worker was normally assigned the duty of carrying out the psychiatrist's recommendations with regard to the social aspects of the plan. In some cases this meant working through the representatives of the referring agencies (school nurse, family welfare worker, probation officer); in others, in which the clinic assumed full responsibility for treatment, it meant carrying on further interviews with the parents, schoolteachers, recreation workers, and any others whose help might need to be enlisted in the child's behalf.

Parents were regarded as being, in the main, sensible, rational people who would want to do what was best for their children. The social worker's chief task was therefore conceived as one of explaining

to them the psychiatrist's recommendations and the reasons for them. The need of parents for a certain amount of advice and instruction about the psychological aspects of child rearing was anticipated, and it was recognized that the social worker might have to use "psychiatric technique" to get them to do what the clinic wanted. It will be noted that this conception of social work—in fact, of the clinic's work in general—had much in common with that practiced in family welfare agencies at the time (the early 1920's) and given theoretical expression in Mary Richmond's book, *Social Diagnosis*. The same assumption about the dominance of reason in human behavior and about ignorance being the chief cause of malfunctioning underlay child guidance work, and the same reliance was put upon the professional worker's ability to devise a plan that would overcome most of the difficulties.

Work with parents soon showed, however, that these assumptions about their ability to accept the psychiatrists' suggestions and to act in accordance with them were often unjustified. Parents were found to be people with ideas and wills and feelings of their own that were not easily changed. Advice about how they should handle their children (give them more affection, for instance, or be more consistent in their discipline, or make fewer unfavorable comparisons among them) was often not received with the interest and co-operative spirit usually afforded to medical prescriptions, or, if the parents did appear to be responsive, they often failed to put the good advice into practice.

This situation was really no different from that encountered by social workers in other fields. Family case workers, child placement workers, and those who gave financial assistance also found that the co-operation of clients was often hard to secure and that the most sensible arrangements often met with opposition. Mary Richmond had said that the characterological aspects of case work had still to be worked out. It was in the child guidance clinics, it seems, that the chief progress in this area was made, for as case workers and psychiatrists discussed their cases, they began to see that psychological factors frequently prevented parents from accepting the case worker's advice and suggestions. In addition, they gradually came to the conclusion that the children's own problems were often due not so much to parents' ignorance about proper child-rearing methods as to their emotional maladjustment.

Thus was born the slogan that dominated child guidance for many years: for every problem child a problem parent. From it was drawn the conclusion that parents should be made the subjects of

treatment and that case work efforts should be directed toward them. There followed a long period in which the attention of case workers and psychiatrists was concentrated upon trying to understand the psychological problems of parents. It was out of this joint exploration that case work in general became imbued with the "psychiatric point of view," for it became clear that much of what case workers were learning in work with their clients in the field of child guidance was applicable to other fields of case work as well.

As soon as psychiatrists began to look upon parents as patients instead of merely as parts of the children's environment that ought to be altered, they applied their theories about human psychology to the problems of the parents' relationships with their children. Meyer had emphasized that the total person and his life history must be taken into consideration in explaining a person's behavior. Freud had confirmed this finding and added to it the theory that all behavior has a purpose, and that this purpose is often not recognized by the person and not wholly under his conscious control. Applied to parent-child relationships, these theories were taken to indicate that parents' attitudes toward their children were deeply rooted in their own early experiences, served purposes and had meanings that could not be easily ascertained, and were usually not amenable to change through the application of reason alone. It was concluded that parents who lacked affection for their children could not give it to them at somebody else's direction, nor was it likely that those who were very inconsistent in their discipline could change their methods because they were shown their mistakes. If they made a superficial alteration in one aspect of their behavior, they were likely to do something equally handicapping to children in another way; hence the problem before the case worker became one of finding methods that could effect real alterations in feeling.

To the solution of this problem psychiatry appeared to offer two leads. In the first place, it was believed that if an individual obtained insight into the causes of his behavior he might be able to change. It was held, however, that insight was not likely to result from telling a person why he behaved as he did but only from helping him to discover that for himself. A psychiatrist or social worker might be able to give this sort of help to a parent because, as a clinician, he would not be personally involved in the parent-child problem (as, for instance, relatives and friends would be), would not sit in judgment or blame the parent for his feelings, and would not propose solutions that

were of his own making. In the second place, it appeared that this kind of relationship between client and clinician itself offered possibilities for rehabilitation. Psychiatrist and social worker would differ in the use to which they would put the feelings thus aroused in the client, but the situation in which a client was freed from the normal social restrictions expressed in praise or blame was itself believed to have possibilities for releasing him from some of his emotional conflicts and enabling him to put to effective use his capacity for self-direction.

Social case workers in child guidance clinics spent many years in working out the methods of incorporating these principles into their practices. Case work methods were carefully adapted to parents' apparent needs as revealed by diagnostic studies. Some parents appeared to need only advice and suggestions about dealing with their children's problems; for some who seemed to be lacking in basic information a kind of educational approach was devised; but for many the development of insight into their own personal problems and modes of behavior seemed to offer the only hope of fundamental change in attitude toward their children. It was believed that this insight on the part of the client often had to include an understanding of how he got to be the kind of person he was, of what his emotional relationships with his own parents had been, for the theory held that only through such insight could basic change be effected.

Concurrently with these efforts at alteration of parents' attitudes toward their children went other measures designed to modify other aspects of the children's social environment. Recreational opportunities were found for the children if such appeared to be needed; discussions with teachers led to alterations in school programs and methods of handling the children in school; arrangements for physical treatment were made if need for this kind of help was indicated; and the services of other social agencies were often secured. In all of these efforts and in spite of the introduction of psychiatric concepts, case work in child guidance clinics remained in the old social work tradition. It was still held to be the case worker's task, shared by the psychiatrist, to make and carry out a plan for the child's social welfare, and this usually meant bringing about changes in his environmental situation. The parents were regarded as usually the most important part of that environment, and the part most often in need of modification. It was, however, considered the case worker's and psychiatrist's professional job to determine the direction and content of the needed environmental change.

This is the point of view of many child guidance clinicians today. Some case workers, however, have derived from psychiatric theory and from their own experience in working with parents a contrary point of view. They hold that it is not their task to determine upon the direction of needed change but rather to offer to parents help in working out their own solutions to the problem of parent-child relationships. Case workers who hold to this point of view do not deny that parents' attitudes toward their children are based on, among other factors, their own childhood experiences, but they do not think that release from present anxieties about their children necessarily entails a basic change in a parent's personality or even an understanding of the sources of his adverse attitudes. They cite recent findings of psychiatric research to the effect that there is more strength in the conscious ego or will than was formerly believed, and that individuals have great capacity for solving their own problems if they can have an opportunity for working out what they want to do about them in an atmosphere from which the stress of disapproval has been removed.

This concept has greatly changed the psychological aspects of case work in many fields. Applied to child guidance, it led to the first clear-cut differentiation between psychiatric and case work treatment. In clinics conducted in line with this concept the child is regarded as the patient (the one who is to be helped to overcome his personality difficulties), while the case worker's assistance is offered to parents in relation both to their use of the clinic and to the difficulties they encounter in carrying out their duties toward their children. Accordingly, cases are confined for the most part to those in which parents seek or desire the clinic's help; the case worker's first interviews with applicants are largely occupied with discovering what they want from the clinic and describing to them how the clinic works and what services it performs; and formal clinic diagnosis and planning are reduced to a minimum.

How the Social Work Function Is Discharged

It will be seen that this latest conception of the case worker's role in a child guidance clinic is strictly in accordance with that of the general function of social work. In the early days of child guidance, psychiatric social workers discharged that function in much the way they did in hospitals and mental hygiene clinics: by securing data about patients that facilitated the psychiatrists' work and by helping parents and others put the clinic's recommendations into effect. For a

time, however, psychiatric social workers appeared to be moving out of the area of social relationships into that of the adjustment of personality difficulties. With their reorientation to the social situation, however (the parent and his use of the clinic; the parent as a person with certain culturally imposed duties to perform), they have not only returned to social work but they have made their services in that field more direct and specific.

With the methods the psychiatrists use in treating their child patients we are not here concerned. In most cases interviews between case worker and parents parallel those between psychiatrist and child, as has been customary throughout child guidance work. In distinction from the earlier methods in which case work centered around advice, education, or insight in accordance with the case worker's plan, the problem with which the case worker now typically works is regarded as being twofold. The case worker has, first, the task of helping the parent with the emotional difficulties he encounters in releasing his child sufficiently so that the child can be free to accept psychiatric treatment. Second, the case worker has the task of helping the parent work out a satisfying relationship with his child.

Many parents think that they want psychiatric treatment for their children but, in trying to retain some measure of control over the situation, they put many subtle obstacles in the way of that process. They may ask the children what went on in the interviews, try to direct what they should say and how they should act, attempt to align the psychiatrist or case worker with themselves and against the child, and in many other ways show that they are not sure they want to use the clinic to help them with their children's problems. It is only as they become really certain that child guidance treatment is what they want for their children that they can be free to let them have it. To work this question out with parents is the case worker's first task and one that calls for much skill and sensitivity.

In working with the parents in the area of such difficulties, the child guidance case worker is fulfilling the social work function of helping his client to remove the obstacles that stand in the way of his making good use of the therapeutic facilities that a social institution—the child guidance clinic—affords. The case worker's second task, that of giving parents assistance with the difficulties they encounter in their relationships with their children, involves another social institution—organized family life. Discussion of this latter problem may branch out to cover the parents' relationships with other

family members and with the people—such as schoolteachers and doctors—who share in the child's care or guidance. In distinction from earlier case work methods, however, the focus in this kind of case work is the child's and the parent-child problems and not the parent's own personality disorders.

Case workers under this conception of child guidance do not work along lines of a preconceived plan as to what kind of modifications in the parents' attitudes should be secured. They recognize that change in attitudes is usually necessary (otherwise there would be no occasion for the interviews), but they hold that only the parents can decide what direction this change shall take or what form it shall assume. Case work is confined to a problem of social relationships, and a close analysis of work carried on will show that the problems that come up for discussion are chiefly those of how the parent can carry on the duties that organized family life imposes upon him. Chief among those duties—the *raison d'être* of family organization itself—is that of protecting, providing for, and caring for children, and closely associated with it is that of giving children affection and emotional security.

It is this latter requirement which most frequently disturbs the parents of problem children. Case work cannot make them love their children but, in so far as it enables them to act on their own convictions with emotional comfort, it may create a more healthy atmosphere for the children.

To put so much emphasis on work with parents is perhaps to give the reader a somewhat distorted picture of case work in child guidance. In the course of a day's work numerous other activities are carried on. Teachers, recreation workers, and others who know the children may be interviewed with regard to the children's behavior or needs; information about physical examinations or about possibilities for camp or foster home placement may be secured; reports may be sent to social agencies that referred the cases and plans for joint work may be discussed with their representatives. It may even be that case workers share in the treatment of the children themselves. In some cases in which the patients are adolescents and the parents wholly uninterested in participating in treatment, case work may be chiefly concerned with helping the children to bring about environmental changes which the psychiatric interviews indicate are needed and desired. For the most part, however, all these aspects of case work grow out of discussions with parents, so that the core of case

work is that which is described above. It is work that may embrace many activities, as does case work in all fields; but its concern throughout is with children's and parents' adjustment to and use of social institutions, notably the clinic itself and the parent-child aspects of family life.

An Example of Case Work in a Child Guidance Clinic

The following extract from a case record is from the files of a child guidance clinic that carries on its work in accordance with this point of view. It has seemed important to give more details in this than in previous examples of case work because, on the one hand, child guidance tends to deal with rather intangible matters that can be better illustrated than described, and, on the other, it contains so many elements that are generic to all case work that this case example can be considered representative of much that has been said about modern case work methods throughout the book. The case as presented here is an abbreviation of a total case record. It shows unusually well the two aspects of child guidance case work: that of helping a parent with his problem of using the clinic's services for himself and his child, and that of helping him find his own solution to the difficulties that have arisen in the parent-child relationship. We shall not attempt a further analysis of the case, for that would take us too deeply into the technical aspects of social case work. If, however, the reader can sense the awareness of and the respect for the client's feelings and purposes that the work in this case called for and the self-conscious skill that it required, he will have gone far toward comprehending the essential nature of present-day social case work.

Case 32 [3]

In May Mrs. Rosen telephoned the child guidance clinic to say that the teacher of the school which her son Max, six years old, attended had suggested she take him to the clinic for study. The case worker replied that they liked to talk to parents before making an appointment for a child, and Mrs. Rosen said that was fine, but her husband would come because she was sick. A few days later he came in. He too said they came to the clinic at the suggestion of the kindergarten teacher and went on to describe the boy's difficulties as those of being slow in understanding

[3] A condensed version of a case worker's record of her work with the mother of a patient of the Philadelphia Child Guidance Clinic.

because he doesn't listen. He is not a bad boy and he seems bright enough, but the teacher will tell him to do one thing and he will do another. The parents like the teacher, but the boy is to go into first grade next fall and the teacher tells them that if he acts there as he does in kindergarten he won't be able to get along.

The father then, on his own initiative, went on to tell about Max's early history. He had pneumonia and abscessed ears when just a baby. He was late in walking and talking, and first learned to speak in Yiddish, at about three and a half. Mr. Rosen thought this matter of having two languages was one reason for his lack of attention. Then he told about how the grandmother, with whom they lived, spoiled Max and how his mother had little control over him. Lately he had begun developing some habits like rolling his eyes and shaking his shoulders. In addition Max had always been afraid of getting hurt, especially of falling and of being burned. Fear, he thought, dominated Max's behavior; in school he was particularly afraid of being laughed at by the other children. Another difficulty, the father said, was Max's inability to carry on a conversation. You ask him one question and he returns with another, perhaps wholly unrelated to what you are asking.

After more detail, the case worker asked Mr. Rosen about how he felt about the teacher suggesting he bring the boy to the clinic. He said he'd like to bring Max to us to "see if he can't become faster in understanding" and perhaps to "get to be more manly." What would be involved in using the clinic was discussed: fees (they were set at 35 cents a visit on the basis of the Rosen's income), frequency of appointment (probably once a week), probable length of treatment, and so on. Mr. Rosen decided for various reasons to postpone treatment until the fall.

In September, in response to a letter from the clinic, the Rosens wrote that Max had improved very much and the case was closed. A month later a private physician telephoned to refer Max again to the clinic, saying there was nothing in his physical condition to account for his problems. This time Mrs. Rosen came to the clinic. She was a plump, easy person with great mobility of expression, but she impressed the case worker as probably being rather stolid as far as relations with other people were concerned. She seemed to have little concern about being referred to the clinic by the doctor, repeated much of what he had said, and recalled Mr. Rosen's earlier discussion with us. Max had seemed to improve during the summer and was eager to return to school but, once there, the same difficulties reappeared. He is inattentive, does just the opposite of what the teacher wants, refuses to pay attention, and so on. When asked whether she had found these same traits in him at home, she said she had noticed them ever since his illness at the age of one year. She mentioned here

that she had been bedridden for three years after his birth, that her mother had taken care of Max, and that he didn't get the right foundation. He didn't play with children, didn't seem to know what was expected of him when he went to school, and now, after a year, still shows this inability to get along there.

Mrs. Rosen sat back and I started to tell her something about the clinic, beginning with the fact that we see children who, though by and large are normal, are "not ones who seem to be mentally ———." Mrs. Rosen did not allow me to finish the sentence. She exclaimed with tremendous feeling that Max is not a mental defective or anything like that. She leaned forward and said, "Do you know what the trouble is—he is afraid!" She elaborated upon this and then said the doctor wanted him to have a psychological test and she has already told Max that that is why he is coming to the clinic. He seems eager enough to come. The discussion then turned to the tests and it was agreed that that would give us a basis for what Mrs. Rosen called a foundation for any work we might try to do. Mrs. Rosen then went on to tell more about Max's problems—how she had to force him to eat; how all the rest of the family spoil Max—it is only she he is afraid of; how she had hoped having another baby (one had been born only six months before) would help Max but it hadn't; and so on. The interview ended with an appointment being made for Max to have the test and for Mrs. Rosen to come in to talk to the case worker about next steps after that. It was my impression, however, that it would be doubtful whether she could really bring herself to have Max treated by the psychiatrist if need for that seemed indicated.

Five days later Mrs. Rosen brought Max in for his test. As he went off with the psychologist, she called something after him about going and doing what the doctor told him to. In answer to my question as to whether he had been told what was going to happen, Mrs. Rosen said she had explained it to him at length and told him he must be sure to answer the questions. She insisted he wasn't a bit scared, because after all she had told him what to expect. It was obvious that she herself was uneasy about what Dr. Brown might discover, and she went earnestly over all she had told me last week, emphasizing the fact that she has no trouble with him at home and attributing any lack of capacity he might have to his early illness. Gradually she was getting toward telling me more about her own relationship with the boy, reporting how she can make him mind when everyone else fails, how she forces him to do his work, and so on. She said at one point that Max was a very stubborn little boy, and she thought maybe the teacher wasn't handling him right, because she has found that you just have to force Max to do what is expected of him—she has crushed a lot of that stubborn will of his. In tones of utter disgust she

said Max was just like a baby: he wanted everyone to do things for him, did not want to do anything for himself. He hates to be away from her, and probably that is one of the reasons why he hates school so much.

I asked her to tell me more about that. Here Mrs. Rosen leaned forward, figuratively took a deep breath as she said she had been wondering just how she would be able to tell me what the difficulty is. She had been thinking about it all week and thought we ought to know. After she had told me, she laughed a little at herself for having been so uneasy about talking these things over with me. She began with her pregnancy with Max, when she had been very ill. The child weighed only four pounds at birth and "looked like a little rat." "When I saw him, I said 'Take him away!'" She explained that she hated the child for all the sickness he had caused her and for the pain. It was not true, as her mother had said, that she would forget all about the pain of labor when she saw the baby. For then she hated him more because he was such an ugly little thing. He had to stay in an incubator and she never went to see him, although everybody told her she ought to be ashamed, but she didn't care. Then she became very sick and her mother took care of the child. At about one year he became ill and nearly died, and Mrs. Rosen said she felt she was being punished for her attitude toward him. He came home from the hospital a changed child—only skin and bones and no will to live. Mrs. Rosen was scared but gradually she helped to "bring Max back to life." But he would have nothing to do with her, preferred his grandmother, and this attitude continued until he was about three, when her own health was restored and she decided to "woo" him to her.

Gradually Max did take her on. Then, little by little, she tried to show him who was boss. "How would you feel if your child preferred your mother to you? Listened to her instead of to you?" She got into plenty of fights with her husband and her mother over this. Her mother accused her of wanting her only as long as she was needed. This was true, Mrs. Rosen said, but she felt chilled to the bone when her mother said it. Now, actually, Max is more afraid of his mother than of anyone, but when she says no he goes to his grandmother, who always says yes. She admitted that she feels pretty helpless in handling Max, though she has put everything she had into making him mind. I said I was a little surprised that one could make up one's mind about that sort of thing and then go ahead and do it, but Mrs. Rosen answered that she is that sort of person—when she makes up her mind it stays made up. I said I believed her. Mrs. Rosen said she thought all of this might be the reason for Max's troubles now. I agreed with her but said that whatever the reason, it lies in the past and that we can do nothing about that. I said it sounded to me as though there were difficulty right now, too, and that that would be the only thing we

could work on. Mrs. Rosen agreed and for the first time really admitted some need of her own for help with the child.

We got down to talking about the test today as a beginning of our knowing what to do, and I spoke of her coming for another visit so that we could discuss the test. She agreed. At the end of the hour Mrs. Rosen was relieved to see Max looking not too unhappy, and she put her arm around him in a very tender gesture, and said, "Well, that wasn't too bad, was it?", and he snuggled against her.

The psychologist reported that Max was a queer looking little boy—with somewhat the appearance of a little bird in the fledgling state—and that he blinked his eyes in a very pronounced manner. It had been hard to keep his attention during the tests, but in the end he tried to be very obedient and co-operative. His I.Q. on the revised Stanford Binet, form L, was 94. The psychologist commented that if Max's attention characteristically wanders as much as it did during the test it was not surprising that he did poor schoolwork. She noted also that his speech was as odd as his appearance; he spoke each word as distinctly and separately as if he had had speech training.

11–1. Mrs. Rosen came in, saying she could hardly wait to talk with me about the results of the test. I gave them to her, with Dr. Brown's comments about the manner in which Max set himself to the task. Mrs. Rosen said she was relieved beyond words to hear that he was not a "mental defective" and told me of her fears when his teacher said he was an abnormal child. This fear and uncertainty had kept her from coming to the clinic earlier. As to Max's behavior during the test, she said that was just the way he was at home and at school. We talked about what a problem this was for her, and the question we came to then was what to do about it. Before I could say anything, Mrs. Rosen said Max was very anxious to come back here, could hardly wait to see "the lady" again. I told her about treatment then, and we had a thoroughgoing discussion of it, with Mrs. Rosen asking questions but being very much interested in trying it out. We talked about how treatment of a child is carried on. When I mentioned her part in it, she said she guessed there were plenty of things she did wrong and maybe she could see what it was and try to learn something different. She assumed that Dr. Brown would be treating Max, and it seemed that that would be a good plan. She then said she would like to talk to the doctor who had referred Max to the clinic, and it was left that she should do this before starting upon further work in the clinic. In a roundabout way, then, Mrs. Rosen asked whether I would get in touch with the teacher to let "that woman" know from a "professional person like you" what the results of the test were.

Just before the end of this interview Mrs. Rosen got to talking about her feeling for the past two years—how she had been "licked" by this child but hated to admit it. I commented that sometimes we just have to face that in ourselves before we get off to a different start, and I thought she had already done that or she would never have come here in the first place. She confided that she had known about the clinic for two years, hated to admit that she needed help with her child, but now she has done it and is feeling better already. There is something in knowing that she can get help to go on with him, and maybe do things differently herself. She was very warm in leaving, promising to call me shortly.

On the same day I telephoned Mrs. Carter, Max's teacher, explaining that Mrs. Rosen had asked me to telephone. She seemed utterly surprised that Max had been here, almost suspicious, and wanted to know who had suggested the plan to Mrs. Rosen. Then she launched into a vindictive account of the kind of boy Max is, told me she thought he was mentally deficient and should go to a special class. It wasn't until she had loosed this tirade that I was able to say anything about what we knew about Max. I was very straight-forward, even telling her the I.Q. rating. I told her of the plans for treatment, whereupon she said Max should be taken to a neurologist or an endocrinologist, since she thinks the trouble is physical. . . . At no time in our talk did Mrs. Carter express the slightest interest in what I was saying.

11–30. Between this and the previous interview with Mrs. Rosen there had been some correspondence about her not having called to arrange an appointment, about the family's illness, and the setting of new dates. When Max and his mother arrived, Max seemed rather scared but his mother assured me that he really wanted to come. The early part of the interview was taken up with her description of an encounter with the teacher in regard to having Max excused from school in order to come to the clinic. The teacher had said that he certainly needed treatment, that he is really a very dull child and belongs in a special class. The physician, on the contrary, did not think there was anything wrong with Max's mind or that he should be put in a special class. I accepted all of Mrs. Rosen's feeling about this, but said I did wonder about the problem Max has in learning. After a bit more discussion Mrs. Rosen said she knew Max needed special attention because he acts at home exactly the way he did during the psychological test.

She launched forward then into a diatribe against him, saying that she could not do a thing with him, he is so stubborn. She said that she has got so mad with him that she is absolutely through, wishes she could put him somewhere where someone else could handle him. She went into detail about this, and I finally questioned her about it. She told me of

her sister's children, who were absolutely wild, who were then placed in a foster home, and in a short time were changed into obedient, well-mannered children. Not only for Max's sake would she do this but for her own, for she cannot stand living with him this way. But every time she mentions it her family have a fit. Her mother and father spoiled Max, but now that he is spoiled they leave her to face the consequences. I said I could understand her feeling in all of this and acknowledged the problem that just living with this child means. Then Mrs. Rosen said that of course she could not place Max in a home; she would have to get rid of her family first. She gave a tight little laugh, but said she was absolutely licked with this child and didn't know where to turn.

I brought up the question of using the clinic, spoke of this way of trying to get at the problem—a way which meant that she would have to go on living with the problem and having to do something about it herself. I said I just did not know whether she could. Mrs. Rosen leaned forward and said, "Well, I don't know what to do with him, and I guess I certainly need some help." She said then with some embarrassment that maybe there is something in her methods that is wrong; she guesses she needs to come here as much as Max does. She then went on to tell about the methods she uses—can't be really firm, flies into futile rages, screams, hollers, cries, but Max goes calmly on ignoring her, doing just as he pleases. She would like to learn how to handle him herself. I said that was something she and I could talk about from week to week, and maybe out of our talking she could find something she could use in relation to the child. She said that this was certainly what she wanted, and she added that if she could get some help, and Max could, maybe things would be better.

12–7. Mrs. Rosen talked first about her own physical difficulties—her difficult pregnancies, anemia, and blood transfusions—and thanked God she was now in better health. Then very seriously she told of a talk her husband had had with the teacher, who now says that Max can do the work, that he has made a few feeble attempts recently, and that she thinks his physical condition is to blame. We discussed this latter suggestion fully, and Mrs. Rosen told of what various doctors had done for Max and how the last one had diagnosed his condition as anemia and recommended treatment which Mrs. Rosen feels she should carry out. I said that then there seemed to be two methods of getting at Max's problem, one a physical and the other a psychological method. She agreed and said one is not more important than the other. Max needs both. Mr. Rosen agrees with her on this, and Max is very eager to come to the clinic.

We then had a thoroughgoing discussion of the problem which we are all agreed on: that Max is a pretty fearful, scattered youngster, with

so much inner disturbance that he is unable to organize himself to cope with his situation. Mrs. Rosen said that she can understand these fears in Max because they are in herself, and she told again of how much a problem Max is to her—how she doesn't know what to do with him, sometimes thinks she should put him away, sometimes hopes Dr. Brown can make him better. I said very frankly that I thought she did hope things would be better with Max through treatment here, but I did not know how much he could get out of this as long as her attitude toward him remains the same. I thought with her feeling so much that she wanted to be rid of him there wasn't much chance for Max.

Mrs. Rosen was very much upset by these statements. It is true that she does feel that way sometimes but it is only half of her feeling. There is another side which is "mother love" for him. She thought that she could make up her mind to love Max, but she sees that in that way lies failure; there must be something else to be done. Her husband disagrees with her methods of pushing Max off and then deliberately wooing him, but even her husband doesn't know what she has told me. She has never trusted anybody enough to tell him what she has told me. She then told me of her suspicions of everybody, how she is pleasant and sociable but it goes no farther in giving or taking from anybody. She thought I was like an astrologist in being able to see that in her, but being a psychologist I could help her with it too. She does trust me, just as Max trusts Dr. Brown. She was white and shaken at the end of the hour but she thanked me for the talk.

12–13. Max could hardly wait to get upstairs for his interview this morning, and Mrs. Rosen seemed as anxious to talk with me. She had good things to report about Max's progress in school. The really joyful thing, she said, was that Max had spontaneously told her about some of the happenings in school; he had never done that before. She went into detail about this and about the teacher's attitude toward Max and her fear that the teacher still thought him feeble-minded, and I agreed to her request to have an interview myself with the teacher in order to learn what she really thinks of Max now.

With that settled, Mrs. Rosen got down to a serious consideration of what she is doing with Max. She smiled at the question and said, "Almost nothing." She sees that her old way of trying to win his affection was wrong and she has more or less stopped that activity and is surprised to find that Max responds to this new way of hers. Her husband backs her up but her parents think she does not bother with Max enough. To me it seemed that this behavior marked some beginning of freedom in Mrs. Rosen herself. It was only near the end of the hour that Mrs. Rosen remembered to ask about how Max was getting along with Dr. Brown.

We had a little talk about that, with Mrs. Rosen pointing out how much Max trusts the doctor, just as she trusts me.

12–19. An interview with Max's teacher. Mrs. Carter was friendly, alert to Max's situation, and sympathetic with his problem. She told that the tests at school also rated him 94 in I.Q. but that special class had been suggested because he had been doing absolutely nothing in her room, and it was thought that there he would get individual attention. She again brought up his physical problems, described Mrs. Rosen as sweetly defensive, thought Mr. Rosen had much more real concern about the boy, and considered Mrs. Rosen dogmatic and controlling. I said that was pretty much my feeling but perhaps Mrs. Rosen would begin to loosen up a bit too. By the end of the talk Mrs. Carter said we must all work together to see what we could do for Max. We promised to keep each other informed about progress.

12–21. Mrs. Rosen was again very eager for our talk together, especially because she wanted to know what the teacher had said. I told her a good bit about it, especially Mrs. Carter's final remark about working together in Max's behalf. Being assured that the teacher does not think Max feeble-minded freed Mrs. Rosen to question the basic problem in this child, and very quickly she got to saying that it is fear—Max is afraid of something, and it is she whom he fears. I said I thought that was so, and for some moments she pondered why he should be afraid of her and, with great embarrassment, denied that she did anything to make him afraid. I said I wondered whether what she had told me before about her feelings about the child might have had something to do with it. She leaned forward and talked very earnestly about this for some time.

Yes, she knows that is the trouble but she no longer feels so hateful toward him. She told me then with great feeling about the change in her that came with the second pregnancy, how at that time she first felt "mother love." The strange thing about it was that her tenderness was for Max too. Today, when the baby looks at her with love and trust it is something to see. Max never looked at her in that way—only with fear in his eyes. She found something changing within herself, but she felt so guilty toward Max she did not know what to do. Now she doesn't feel quite that way—because she is doing something. Each Wednesday she feels she won't be able to keep her appointment here, but every Thursday morning she can't wait to come. Yesterday she thought she would be too sick and Max was so disappointed, but she took him on her lap and said, "Don't worry, Max, Mother will be all right tomorrow. I'm not going to let anything stop us from going to the clinic." The expression on Max's face when she told him that was something to see. She had

never said anything like that to Max before, but she finds herself feeling that way, not thinking about it. She made quite a distinction between thinking and feeling—admitted she could not "just make up her mind" about loving Max—that it had to come from the inside. That she loves him is proved by her bringing him here, she said.

She faltered then, overcome with feeling that all of Max's unhappiness is the result of her having been a bad mother to him. I said that was so, but I added she was right about the change in herself or she would not be bringing him here. We talked a little about what she has done to him in the past, and Mrs. Rosen made the point that she could not make up for those years but might be able to do something different now. She knows she is different because she feels different inside.

12–28. This interview was taken up chiefly with Mrs. Rosen's telling about incidents in their home life during the week—how the baby had been sick and she had to find a new doctor, which was further proof to her that parents have to "make changes from time to time." In response to sympathy she said that a parent ought to realize that rearing children is not always an easy job and that one does not always know all the answers about it. Then she told how she had handled Max's wanting to play with his drum while the baby was sick and asleep. She had let him play it when the baby was awake but threatened to throw it away if he played at other times. When he persisted, she was about to take it but decided to let him play in the cellar instead. She thought this a sign of improvement in her methods—more sympathy for Max, more imagination on her part—and I agreed.

Later, when she talked of Max's admiration for Dr. Brown, I sensed some of the fear and pain there was in that for her and said I guessed it sometimes hurt a mother to see her child loving and trusting somebody else so much. She looked away from me, started to deny it, and then said it did feel a little funny to her but, she added, "I didn't do so well by Max; maybe it would be a good thing if Dr. Brown can help him. I at least owe him that." She elaborated a bit on her hope that we would be able to help Max. I let her state it that way for a while, and then said something about her own relationship to Max. She answered that she was changing; she could feel it but she could not put it into words. I said I could understand how that was.

After that, Mrs. Rosen got to telling me of something Max had done, how angry she had been, and how she punished him by depriving him of something he wanted. She said it seemed to work better than the old method of "hollering" and hitting him. Then she talked about how angry and baffled she used to be with Max, and how she was never able to do

anything with him at all. Then we went downstairs to meet Max, and I was amazed to observe how full of life the child had become.

From this time on (from the beginning of January to the middle of April) the interviews were full of good reports of Max's progress in school and at home and of Mrs. Rosen's increasing pleasure in Max and confidence in how to handle him. He suddenly began to read very well in school, was promoted in February instead of being sent to special class, was more assertive with his mother, less timid and fearful with her, played better with other children, and by the end of the period was behaving in a way which both mother and teacher considered very normal.

Mrs. Rosen's confidence in her ability to work out methods of handling him continued to increase. Her relations with other members of the family also improved, she reported. Her own mother began to accept her as the real mother in the house. All in all she was finding home life and marriage very satisfying. Nevertheless she was very reluctant to stop coming to the clinic, fearing that her ability to go on rested on her weekly interviews. She did continue for some time after Max's treatment ended but finally decided that she had enough confidence to go on by herself. In these latter interviews she had much to say about little difficulties that kept arising, but then would go on to describe how she was dealing with them. I used one of these statements to say something about how the clinic may help one over a hump with a child, but that in leaving here there are still many problems left for a mother to cope with in her daily living. She smiled, carried the thought a little further, and gave me an opportunity to say that I had a great deal of faith in her ability to deal with such difficulties herself. At the end of the last interview Mrs. Rosen was radiant and very warm in her feeling toward the clinic, thanked Dr. Brown and me, and spoke of coming in some day to let me know how things go with them. She might get in touch with me again, she said, if something comes up she wants to talk over. I said we would continue to be interested.

Suggestions for Further Study

Allen, Frederick, "Evolution of Our Treatment Philosophy in Child Guidance," *Mental Hygiene,* XIV (1930), 1–11.

Describes two stages in the evolution of child guidance treatment philosophy. Although its conclusion that work should usually be concentrated upon the parents rather than upon the young child would not find complete acceptance today, the rest of the article states unusually clearly some of the reasons underlying current practices.

Blanchard, Phyllis, and Rose Green, "Case for Symposium," *American Journal of Orthopsychiatry,* VII (1937), 383–422.

Description of a case that shows how a psychiatrist, a psychiatric case worker, and a child placement worker co-operated in the treatment of a child.

Fink, Arthur E., *The Field of Social Work,* Henry Holt and Company, 1942, pp. 160–70.

A vivid case illustration of how a child psychiatrist carries on treatment and how a case worker works with parents—helping them to use the clinic and helping them to straighten out their feelings in regard to their children.

Gartland, Ruth, *Psychiatric Social Service in a Children's Hospital,* University of Chicago Press, Chicago, 1936.

A description of the work of a psychiatric unit within a pediatrics department of a children's hospital. Emphasis is put upon the psychiatric social worker's services, and examples are given to show how the working methods have changed within recent years.

Hartwell, Samuel W., *Fifty-five Bad Boys,* Alfred A. Knopf, Inc., New York, 1931.

Analysis of these boys' difficulties and how they were helped by a child guidance clinic.

Stevenson, George, and Geddes Smith, *Child Guidance Clinics: A Quarter Century of Development,* Commonwealth Fund, New York, 1934.

The origin, development, and working principles of the child guidance clinics that are patterned after those originally sponsored by the Commonwealth Fund.

Towle, Charlotte, *Social Records from Psychiatric Clinics,* University of Chicago Press, Chicago, 1941.

A group of cases collected for teaching purposes and analyzed from that point of view. The uninitiated reader must understand that not all of the work in these cases is considered exemplary and that much of the discussion is technical.

Witmer, Helen Leland, *Psychiatric Clinics for Children,* Commonwealth Fund, New York, 1940.

An analysis of the assumptions and theories underlying psychiatric work with children, a description of the programs undertaken under state auspices, and a review of the recent developments in child guidance work. Chapter XII is especially pertinent to the questions discussed in this chapter.

Chapter XVIII

SUMMARY AND IMPLICATIONS FOR OTHER ASPECTS OF SOCIAL WORK

With the foregoing survey of how the social work function is discharged in the fields in which the majority of social workers are engaged, we have perhaps answered the questions of this investigation sufficiently to warrant a recapitulation and the drawing of some conclusions. The organizations that have been described are not the only ones, it should be pointed out, in which or through which social work activities are carried on. The social work aspects of travelers' aid society services, for instance, have not been discussed, or those of organizations giving assistance to immigrants and emigrants. Not much has been said about social work in organizations serving other particular classes of individuals—adolescent boys and girls, unmarried mothers, the aged, handicapped persons, and so on—chiefly because it seemed that social work activities are better explained in relation to social institutions than to categories of individuals and their disabilities.[1]

In addition, it may appear that inadequate attention has been given to community organization and to those other aspects of social work (administration, research, social action) that make possible the carrying on of work with individuals who find social relationships difficult. It has seemed, however, that with the distinguishing characteristics of social work classified and its central function revealed, its specialized processes and methods are not in need of much elaboration and that its auxiliary services fall easily into place. For the value of a definition, its dynamic function, lies—as was pointed out in the first

[1] To be more specific about this point, it can be shown that these categories of individuals do not come to the attention of social agencies because they are, for instance, old or adolescent or unmarried, but because, having such characteristics, they are in difficulty about jobs or family relationships or have other problems in relation to organized groups.

chapter—in the control it gives over further analysis of the subject in question. Hence it has seemed more important to test out and refine the functional definition of social work by reference to the primary activities than to apply it less rigorously to all fields.

To give a rounded picture of the institution of social work, however, and to show how its function is fully discharged, we must give at least brief consideration to its auxiliary activities. It will be recalled that in our original analysis of the social work institution some doubt was expressed as to whether all of group work, community organization, public welfare administration, and social action are legitimate parts of social work, for consideration of their activities suggested that some of them belonged to other institutional systems. Certain kinds of group work, for instance, were shown to have an educational function, and others a recreational function, and still others were directed—along with other psychiatric or psychological services—to the alleviation of mental ill-health.

Other activities that are sometimes included in social work were found to have an independent institutional character, in that the organized groups by which they are carried on operate under their own "charter" and wield a "material apparatus" in the performance of a function that is distinctively their own. The public relief system, for example, was found to be long established, traditional and legal in character, and directed to the end of compensating for lacks in the economic organization of society regardless of what system of values and rules governed relief procedures. Many other public welfare and child welfare systems of activities were found to parallel the organized systems of educational, health, and recreational activities through which the needs of individuals able to pay for services are met. It was noted that social work activities are frequently carried on in connection with some of these social welfare programs; but that the programs themselves should be regarded as forming a part of social work seemed very dubious, for their prime functions are quite different from that which our analysis identified as being peculiar to the activities that are indubitably social work.

This conclusion is so at variance with the conception that equates social work with the carrying on of social welfare activities that some analysis of the underlying assumptions seems to be required before we proceed with the description of what we have termed the auxiliary activities of social work.

Distinction between Social Work and Social Welfare Services

Social welfare or public welfare (the terms are frequently used almost synonymously) has never been exactly defined. It has been suggested that the opposite of "social" is "individual," and the opposite of "public" is "private." Again, "social" is sometimes contrasted with "physical" and "public" with "privately financed." None of these distinctions appears to be conclusive. Close analysis of the programs that are comprehended under the heading of social welfare services suggests that one distinguishing characteristic is the absence of the profit motive in their establishment and maintenance, and another that their organization is not the result of individual initiative. Social welfare programs are set up when the public need surpasses that which is met by private enterprise, when the individual disabilities resulting from the lack of such services interfere with the welfare of the majority of the population, or when it is felt that these services are owed to their potential recipients. The presence of such characteristics accounts for the inclusion in the social welfare services of such diverse programs as those of social insurance, public assistance, subsidized housing, public recreation, public health, and the wide array of charitable or non-fee-charging institutions for the care of children, the aged, the feeble-minded, the psychotic, and so on. It does not, however, account for the exclusion of public education from the social welfare category; and in that connection it is of interest to note that in England free schools are included under the "social services."

Without attempting to be more precise in regard to the definition of social welfare services, it is clear that all of these services represent attempts on the part of the government or philanthropic individuals or corporations to fill up gaps in the usual institutional arrangements of our society—gaps so large that without such services the basic needs of considerable numbers of the population are not adequately met. In this fact may lie the explanation of the exclusion of public schools from social welfare services: so accepted in the United States is the provision of schools by governmental authorities that public schools no longer "fill a gap" but are themselves a "usual institutional arrangement."

Our analysis has shown (Chapter VII) that social work developed out of an attempt to meet the problem that the oldest of these social welfare services, the poor relief system, continually created—that of the potential pauperization of the recipients of its benefits. The

methods the early social workers proposed using did not find wide acceptance among the poor law authorities and the disbursers of private charity, with the result that the charity organization societies turned to relief giving on their own account. This meant an assumption by these agencies of two functions: that of providing the means of subsistance to needy individuals not covered by the usual economic arrangements of the society, and that of helping these clients to overcome the difficulties that were believed to have put them in this position of need.

This assumption of the two functions by one type of organization (justified as it may have been, and still is) obscured for a time the peculiar contribution of the new service, social work, and led to its identification with charity. Nevertheless the peculiar character of social work did not wholly escape notice. Social work principles and methods were slowly adopted, or independently developed, by child-caring and child-placing organizations, and social workers were added to the staffs of hospitals, courts, and schools. In addition, attempts were made to achieve the social work aim of social rehabilitation by group methods. In brief, social work slowly came to be recognized as being a separate body of knowledge and skills that could be utilized with benefit in many kinds of settings.

The significance of this development lies in the fact that social work thereby achieved independent status and became a social institution (that is, an organized system of activities carried on by designated personnel in accordance with a charter) in its own right. The inevitability of this institutionalization of social work is apparent once the function of the institution is clearly understood, for any set of activities that meets an important cultural need must be standardized and regulated in order that its services shall be effectively rendered. What is important for our argument, however, is the fact that this institutionalization of social work—its establishment as an independent profession—sets social work definitely apart from social welfare services, even though it may often be so closely associated with them that this separation at times escapes notice.

When the function of social work is clearly perceived, the distinction between social work and social welfare services is apparent. The general function of the social welfare services, it has been indicated above, is to fill up the gaps in the so-called normal institutional structure of society; that is, to provide the means by which individuals can secure physical maintenance and care, protection against disease

and disability, recreation and shelter, and so on, even though they cannot afford to pay for such services or the profit motive does not lead to the establishment of such services for them. The function of social work, on the contrary, is to help individuals to overcome the obstacles that stand in the way of their use of these and other services—in other words, to help them to operate effectively within the institutional arrangements of society.

When this distinction between the functions of social work and social welfare services is not recognized, or not accepted, social work is either equated with social welfare or is considered the means by which social welfare services are rendered. It is this conception, it seems, that leads to the division of social work into "fields" of coordinate activity: social case work, social group work, community organization, public welfare administration, and social action. According to that way of viewing the matter, social work has diverse aims and functions. It seeks to provide help to individuals with regard to their problems of social relationships. It tries to fill the gaps in economic and social organization so that no individuals are left with essential needs unprovided for. It strives to effect change in current social and economic institutions so they will serve people better.

Aside from the fact that it is highly doubtful that such a diversity of duties would be delegated to any one group of persons or could be assumed by them, this conception of the nature and purpose of social work would not provide the basis for the establishment of a profession or for the development of a specific body of theory and skills on which a profession could depend. For the aims and activities comprehended under this broad conception of social work are aims and activities that engage the attention of numerous individuals and organizations of diverse interests and institutional connections. Their very lack of preciseness is useful for certain purposes, such as mobilizing public opinion or uniting the efforts of workers in interrelated fields, but the multiplicity of these aims and activities makes clear thinking about the problems of social work difficult and impedes or confuses its practical pursuits.

Social Work as a Social Institution

How the definition of social work was arrived at

The contrary definition of social work as a social institution with a distinctive function that sets it apart from other organized systems

of activities did not result from an arbitrary choice of words and concepts but grew out of an analysis that followed the rules of scientific procedure. To recapitulate the plan and method of our investigation, it will be recalled that we followed Dewey's advice about how to resolve the vague and indeterminate question—what is social work?—into its problematical elements by discriminating between those aspects of the situation that were clear and those that were the subject of dispute. This led to the identification of social case work and certain kinds of group work and the organizational, administrative, and research activities necessary to put them into effect as being undoubtedly social work in the opinion of all authorities. The rest of group work, many public welfare activities, some activities in the fields of community organization and social action were accordingly set aside as the "unsettled aspects" of social work, their inclusion or exclusion to wait upon further knowledge about the nature of the activities clearly agreed upon as those of social work.

Consideration of these "settled aspects" led to the hypothesis that they constitute a social institution, and a detailed analysis of them was made to see whether this proposition was correct. Since this appeared to be the case, our knowledge of at least those aspects of social work was considerably advanced, for all that is known about social institutions—their reasons for being, their interrelatedness, their functional character—was added to it. We were led, therefore, into a further analysis of these social work activities in order to learn what part they play in relation to other social institutions, under what circumstances they came into existence, and what human needs they serve.

In this process certain of the unsettled aspects of social work became clarified, for analysis of function led to the conclusion, as pointed out above, that some of the activities frequently considered a part of social work really belong to other institutional systems. Social work's own peculiar function—the end it accomplishes that differentiates it from other organized systems of activities—was found to consist of giving assistance to individuals in overcoming the difficulties that stand in the way of their playing their expected roles in organized groups or making use of those groups' services. Over the years, various methods have been used for the accomplishment of that end, and various philosophies and theories have directed the endeavor. There have even been periods in which the whole effort seemed to many of its practitioners rather futile, so overwhelming were the

adverse social and economic conditions under which the majority of the population lived. At those times emphasis was put upon social reform or social action, and there was much talk of giving up or subordinating the individualizing services of social work and turning the attention of social workers largely to social and economic reconstruction on a mass scale.

Analysis of what was actually done by social workers along these latter lines showed, however, that the changes they tried to bring about (such as the provision of more nearly adequate public relief allowances or better housing arrangements by government authorities) and the changes the social agencies themselves instituted (such as employment exchanges, workrooms, day nurseries, and so on) were occasioned by the discovery that individual clients' participation in organized group relationships was handicapped by these lacks. Moreover, the actual provision by social agencies of these additions to the usual economic and educational facilities was either short lived or on a small scale. In addition, even during the periods of special interest in social reconstruction, interest in social case work and social group work persisted, and the end result of the discussions and the new activities was chiefly a clarification of social work's prime function and a discarding or altering of some of its theories and methods.[2]

Such a development is in line with what was to have been anticipated in the light of the theories of functional sociology. On the one hand, it is to be expected that a social institution that meets a basic human need such as that to which social work is directed (the necessity of each individual to find a way to utilize the established services of organized groups) will persist and grow, in spite of the shifting purposes of its leaders, unless the conditions that called it into existence so materially alter that it is no longer needed. On the other hand, efforts to set up an institution whose main purpose would be to effect change in other institutions are likely to meet with only limited success, for social institutions are only slightly responsive to such deliberately planned actions, unless (and perhaps not even then) the actions are those of very authoritative governmental bodies.

[2] As illustrative of this latter point the shift of emphasis in the early 1900's from "character" to environment as the chief causal factor to be considered in case work may be mentioned (see Chapter VII), while in recent years a similar effect is to be seen in the efforts social case workers and social group workers have made to clarify the nature of their services and to adapt their methods to large-scale undertakings.

The nature of social work as an institution

In addition to this analysis of the function of the institution of social work, further description of its nature must be given before the place of the various auxiliary activities in it can be made clear. It was earlier pointed out that society is made up of many institutions and that individuals play their parts in many of them at the same time. These systems of activities that are called institutions include both the easily recognized organizations, such as individual hospitals and social agencies, and those that are not generally regarded as having so concrete a form, such as "organized medicine" and social work.

The difficulty of conceiving social work as a social institution stems in part from the terminology itself—social *work*. "Work" is something one does; medicine and law, something one practices. It is not so difficult to see that medicine—all the complicated system of activities by which the physical ailments of man and beast are prevented, alleviated, and cured—is a many-faceted institution whose primary function is directly discharged by a body of professional workers engaged in the practice of certain skills. Social work can be similarly described, but the concept continually eludes us. For we are inclined to say of a given practitioner, "She is doing social work." Then, having clarified for ourselves the nature of her activities, we are disinclined to classify under the same category the work of all those others—administrators, research workers, planners, and coordinators—through whose efforts the practitioner's activities are made possible. Perhaps if we said—as is often said—"practicing social work" (overlooking, thereby, the faulty diction), some of the difficulty would be eliminated, for the analogous distinction between "practicing medicine" and being "engaged in," say, public health work is clear.

However that may be, the institution of social work covers more activities than those of the professional social worker just as the institution of medicine covers more than those of the physician. This diversity of activities is characteristic of institutions, for all of them require many kinds of work in order that their main function be achieved. Possible confusion with respect to the activities and the personnel of the institution of social work is introduced, however, by the fact that social work—in addition to being an institution itself—is carried on largely through other institutions; that is, through social agencies or in connection with other organizations rather than through the

"private practice" of professional skills. Each of these agencies or organizations represents the union of the efforts of a variety of specialists (maintenance and clerical staffs, professional workers, administrative officials, and others) for the achievement of its purposes. Not all of these individuals, however, are to be regarded as members of the institution of social work. The test of inclusion or exclusion there depends on whether or not they operate under social work's charter and whether or not their work is carried on in accordance with its rules and norms.

Such a conception of the institution of social work includes within its scope more than social case work and social group work activities, for the function of social work cannot be discharged unless conditions are created that make the giving of service to clients possible. Among these latter categories of activities are those of administration, research, central organization and planning, and others of somewhat similar nature. These, we maintain, are not independent enterprises with objectives of their own (if they were they would constitute separate institutions), but are auxiliary to social case work and social group work in that they are undertaken with the specific aim of promoting the social work function. This aim serves as a criterion for judging whether and to what respects those "disputed" activities, public welfare administration, community organization, and social action, are a part of the institution of social work, and as such it will be used in the following comments.

Administration as a Part of Social Work

The importance of administration in social work arises largely out of the fact that most social work activities are carried on through organizations rather than through private practice. Since this is so, it is obvious that the rendering of services to individual clients (that is, the fulfillment of the primary social work function) is dependent upon the existence and the wise management of social agencies.

This fact sometimes escapes notice when attention is concentrated upon methods and services of social case workers and social group workers; or, if it is taken into account, the social agency may be regarded chiefly as the medium through which the individual case workers and group workers are given an opportunity to practice their skills in whatever ways and to whatever ends their professional training and their individual abilities direct. Current social work theory, how-

ever, stresses the fact—always present but not always made explicit—that social agencies and social work departments within other organizations are established in order to give assistance to specified categories of individuals with respect to problems of a particular nature. Since this is so, administrative activities must be recognized as a vitally important part of social work, for it is through them that the objectives of the sponsors of social work services (be they philanthropic individuals, the directors of other organizations, or the taxpaying public) are translated into work with individual clients.

This function of administration—the uniting of policy and personnel to carry out the purposes for which the organization was established—is not unique to social work but, rather, defines administrative activities in any setting. In each social institution, however, administrative activities acquire different form and content by reason of the different functions that the institutions themselves perform. This point is of particular importance to our present analysis, for it has previously been shown that while social work is carried on through individual organizations (social agencies, schools, hospitals, child-caring institutions, relief agencies, and so on), not all of the activities of those organizations are necessarily to be regarded as social work. To discover, then, what administrative activities are a part of the institution of social work requires close consideration of the functions of the organizations through which social work services are given to clients.

What administrative activities belong to social work?

The peculiar character of administrative activities in social work can be seen most clearly in agencies, such as family welfare and child placement organizations, that are wholly engaged in social work, while the chief dispute in regard to which administrative activities belong to social work arises in connection with the public welfare services. Since the latter question is the more troublesome one, in that, as long as it is unanswered, clarity in analysis of social work administration is difficult to achieve, it seems best to attempt to answer it first.

An approach to the answer can be made by considering a more extreme example. Where do the administrative activities of social work enter when case work services are carried on within a school or hospital? Are the activities of the school or hospital administrator through which the social service department is set up and its operation made possible to be considered a part of social work?

These questions can perhaps be answered by considering why social work services in schools and hospitals are instituted. It is obvious that these services are not added for the purpose of giving employment to social workers or giving them an opportunity to practice their skills. On the contrary, the services are added because the governing boards and the administrators believe that the functions of the schools and hospitals will thereby be better carried out. The administrative activities of school and hospital directors that make the carrying on of social work possible are therefore no more a part of social work than the administrative activities that make possible the planting of school and hospital gardens are a part of agriculture.

On the other hand, within a school or hospital the social work department has various administrative tasks to perform in order that effective service to clients can be given. Many of these are directly related to the school's or hospital's purposes and consist of the framing of policies and procedures through which case work or group work can be brought to the service of the other professions' objectives. These administrative activities, however, are guided by the values and rules of social work and have as their goal the direct furtherance of social work's function. As such they are clearly a part of social work, and those who carry them on are rightly considered social workers or social work administrators.

Now when it comes to a public welfare program, particularly a public assistance program, the test of whether certain administrative activities are a part of social work would seem to depend upon what function they promote. If the activities are directed to framing the policies and organizing and managing the institution's personnel and resources so that, for instance, certain classes of individuals are given the financial assistance provided by law, they would not be a part of social work according to our concept, for they would be one of the means through which the function of the economic institution, public assistance, is carried out. On the other hand, if these activities are directly concerned with facilitating the giving of help to individual clients in overcoming the difficulties they encounter in making use of this economic institution (which may, of course, involve their resolution of difficulties in regard to other institutions as well), then they would be a part of social work.

Such an analysis of differentials may appear to be pedantic, and in the actual practice of many public assistance agencies it would not need to be made. In many of these agencies economic and social work

functions are inextricably interwoven, as has already been seen when the activities of social case workers in those agencies were examined. It was pointed out at that time [3] that the same individuals may both provide eligible applicants with financial assistance and give them help in dealing with the problems which the acceptance, use, and relinquishing of that assistance creates. We saw, however, that this latter form of service is not always afforded by a relief agency; that many agencies limit their activities to giving funds to eligible applicants and to determining upon the amount and duration of their need. By these latter activities the primary function of the institution of public assistance is discharged, for our analysis showed that historically and currently that institution operates to fill a gap in the economic organization of our society.

The services of social work are added to those of public assistance when it is recognized that clients may have difficulty in utilizing the services of the assistance agency constructively. The parallel with the reason for the introduction of social work services into a school or hospital is clear. As in a school or hospital, the introduction and maintenance of social work services in a public assistance program require administrative activities, but these activities do not thereby become a part of social work. On the other hand, the actual carrying on of social work within any organizational setting requires administrative activities of its own. It is these latter activities that constitute the administrative aspects of social work.

In a public assistance agency these activities are usually carried on by the same person or persons who are engaged in the administrative activities required for the giving of relief to clients, but that fact does not erase the distinction between the administration of social work and the administration of public assistance, even though for practical purposes the distinction need not always be maintained. From the point of view of social work theory, however, it seems of importance to draw lines between administrative activities that (1) promote the functioning of institutions other than social work, (2) make possible the practice of social work in connection with those institutions, and (3) actually facilitate the carrying out of the primary social work function, for in the absence of such distinctions the clear perception of the nature of social work is lost.

[3] See Chapter X.

Characteristics of social work administration

Aside from this question of which administrative activities shall be regarded as belonging to social work, the analysis of the administrative aspects of social work does not appear to present great difficulties, although the principles underlying such administration are still in a rudimentary stage of development. Administrative activities are a necessary part of the system of activities that comprise the institution of social work because—as in all other institutional systems—structure and organization have to be determined upon and personnel and policies have to be united for achieving the institution's objectives. The framing of policies represents the translation of the rules and norms of social work into precise statement that guide day-to-day practice. The testing of those policies—another important administrative task—requires continual examination of their effectiveness in facilitating the giving of service to clients.

The administrative activities of social work assume specific character not only because of the function of that institution but also because of the means through which the function is carried out. Administration in social work must continually be concerned with bringing together client and agency resources under such conditions of physical and psychological comfort as will enhance the likelihood of the client's receiving help. The provision of these conditions necessitates such varied activities as the choosing of suitable staff, the providing of satisfactory quarters, the framing of clear, consistent, and helpful policies and procedures, and the establishment and maintenance of personnel practices that sustain staff morale and enhance professional performance.

Administrative activities in social work must also be concerned with translating the desires of the sponsors of social work into professional practice and with bringing to the attention of these sponsors (board members, contributing public, legislatures, taxpayers) the specific needs of the clients and the ways in which the profession proposes to meet those needs. Finally, administrative activities must insure that the services to clients are efficiently as well as effectively rendered. In short, administration in social work must utilize the agency structure to translate the purposes of the sponsors into the activities of the case and group workers to the end that the function of social work is discharged. For, as a recent writer says, "the sole object of social agency organization, the sole function of administration, the sole justification

of all structure and policy, is to be found in the performance of a needed service to human beings. . . . In what happens at that spot where the recipient asks, takes, and uses help are imbedded all the essential tests of administrative structure and operation, along with all the tests of professional technical competency of the individual worker." [4]

Community Organization as a Part of Social Work

Application of the criteria evolved in the analysis of administration as a part of social work serves somewhat to clarify the question of the place of community organization and social action in that institution. Community organization, or social welfare organization as many prefer to call it, has recently been defined as "the art or process of bringing about and maintaining a progressively more effective adjustment between social welfare resources and social welfare needs." The activities commonly engaged in are concerned with "fact-finding, raising standards, promoting teamwork and improving and facilitating inter-group relationships; increasing public understanding; enlisting public support and participation; and initiating, developing, and modifying welfare programs." [5]

It will be noted immediately that this definition is made in terms of social welfare rather than social work. Whether this is a deliberate distinction or whether those who framed the definition considered the two terms synonymous is not known. It is clear, however, that, from the point of view of our conception, some of these community organization activities do not belong to social work. This is particularly true of "initiating, developing, and modifying welfare programs," if by the term "welfare programs" is meant the wide array of social institutions (such as those concerned with public health, recreation, employment placement, relief, and so on) through which gaps in the institutional structure of society are filled up. To say this is not to deny that community organization efforts, as here defined, are necessary. If they are excluded from social work it is only because they are not directly con-

[4] Kenneth Pray, "The Agency's Role in Service," in *Training for Skill in Social Case Work*, University of Pennsylvania Press, Philadelphia, 1942, pp. 120–21.

[5] Arthur Dunham, "The Literature of Community Organization," *Proceedings of the National Conference of Social Work* (1940), p. 413. This definition is based on the findings of a committee of the Conference that in 1939 reported in regard to the general aim and secondary objectives of community organization.

cerned with the furthering of the social work function—the provision of help to individuals in their use of existing institutions.

The furthering of that function obviously requires many of the activities that are embraced under the heading of community organization. The facilities through which social work services are offered to the public must be established and continuously supported. Harmonious and understanding relationships among agencies must be promoted, so that their services can be co-ordinated and made available to individuals who are in need of the kind of assistance that social work affords. The kinds of help the individual social agencies themselves have to give must be described to the public, both to those members of it that contribute the funds and to those (not necessarily a different group) who may want to use the services.

These and other activities of an organizational nature are a part of the institution of social work by reason of the fact that they are directed to the attainment of that institution's objectives. Fairly comparable activities form a part of the institution of medicine and of the institution of education, as a little reflection about the broader aspects of those professions will readily indicate. In fact all institutions that have services to offer the public and whose maintenance depends upon public support must engage in some or all of these so-called community organization activities. In some social institutions some of these activities are called by other names: public relations, for instance, or even advertising.

These latter examples are enlightening, for they call to attention the fact that, in a highly organized society, activities of this organizational nature may be so time-consuming and so specialized that they are undertaken by distinctive personnel and become institutions in their own right. It may be that this is what is happening in the social welfare field. If this is so, community organization is to be regarded as a system of activities separate from other social institutions and having its own personnel, charter, and norms and rules of conduct. Such a conception would account for the fact that the services of the institution of community organization could be enlisted in the promotion of numerous kinds of other institutionalized activities—organized recreation, public health, social work, and so on—without thereby being considered the peculiar possession of any of these institutions.

Such a conception of community organization would not invalidate the previous observation that social work as an institution includes among its own activities some that are of a community organization

nature. Examination of the activities of social workers—whether their practice is usually confined to case work or group work or administration—will show that they are frequently engaged in making their services known to various groups or individuals in the community, describing their work, soliciting community support in terms of both funds and referrals, securing the use of other agencies' resources for their clients, co-ordinating their agency's work with that of other organizations, and so on. All of these activities are undertaken in the interest of their clients—in order, that is, that the primary activities of social work can be carried on. Whether the work of community organization is undertaken by social workers in connection with giving help to individual clients or for advancing the work of an agency, or promoting the general cause of social work in a community or larger geographical area is not a matter of great importance for defining the place of community organization in social work. The important point is the end to be achieved. As with administration, the distinguishing characteristic of community organization as a part of social work is that it is directed to the carrying out of the institution's function.

Community organization, like other types of activities (such as administration and research) that may belong to various institutional systems, has special characteristics when it is a part of a social work. Just what these characteristics are is a question that has not been fully explored but some indication of their nature can be secured by considering what is required in order that a social agency operate effectively in a community.

The fact that social work is largely carried on through social agencies that do not charge fees for their services determines in part why community organization is necessary and how it must be carried on. A mandate to operate an agency—indicated both by financial contributions, tax-derived or not, as the case may be, and by the use of an agency's services—is the basic necessity for the practice of social work. This mandate is often secured by appeals to impulses of charity or humanitarianism, but such appeals are often self-defeating, for they are likely to stigmatize the recipients of the agency's services and so decrease the likelihood that the social workers can be helpful to them. In addition, appeals for agency support that are made on this basis carry with them no insurance that public backing will not soon shift to organizations and programs that promise more speedy results. One problem of community organization for social work, then, is how to "sell" a product whose benefits are intangible, by and large, and accrue

for the most part to individuals other than those who contribute the funds.

It has been suggested that this task can be accomplished effectively only through utilizing the theories and methods that are basic to other social work activities; that is—to state the matter in institutional terms—through abiding by the charter and rules of social work. To be more specific, the work of enlisting a community's support for a social agency must be based upon an understanding of a community's usual modes of behavior with respect to the situation in question and must take into account the extent of its interest in and desire for change, as well as its conception of the desired direction of change. The kind of service an agency has to offer must be explained in terms that carry meaning to its potential supporters and users, and the appeal for their assistance must leave them free to make their own decisions without antagonism, anxiety, or guilt.

These principles are applicable in the various aspects of community organization activities: in initiating a social work program and in raising funds for its continued support; in securing acceptance of services financed by outside funds, such as a federal child welfare program or a state-financed child guidance clinic; in making the services of an agency, such as a clinic or a family welfare society, available to other organizations, such as churches, schools, and courts; in securing the assistance of other organizations or individuals for a client or groups of clients.[6] The principles are probably important in all community organization for social welfare (and if so, would form part of the charter of community organization if it became a separate social institution), but they have special pertinence for organization for social work because, when followed, they make much easier and much more effective the carrying on of social work with individual clients.

Social Action as a Part of Social Work

The question of the place of social action among social work activities can also be answered by reference to this institutional and functional conception of social work's nature. Generally speaking, social action is directed not to the improvement of the situation of individual clients but to the improvement or amplification of institutions them-

[6] For illustrations see Mary Clarke Burnett, "The Role of the Social Worker in Agency-Community Relationships," *Proceedings of the National Conference of Social Work* (1941).

selves. The methods used to this end are the assembling of data, the arousing of public opinion, pressure on legislatures, and other methods of a political character. Since, according to the institutional concept, social work includes not only work with clients but also those activities that are undertaken with the specific aim of promoting the social work function, social action might be regarded as a part of social work. It would be considered a part, however, only if it could be shown that it was needed to fulfill social work's function.

The usual argument in favor of social action as social work is the one made frequently in the 1890's and again during the economic depression of the 1930's: that it is futile to attempt to help people cope with social difficulties when the institutions themselves (particularly the economic ones) so clearly fail to meet human needs. This is obviously a denial of social work's function, and the accompanying proposal that social workers should take as their chief goal the improvement of social institutions seems unwarranted by the charter under which social work operates.

On the other hand, the conduct of social work itself requires the presence of numerous institutional facilities through which individuals can be helped to meet the difficulties they encounter in social life. Many individuals, for instance, cannot play their roles in family groups or take advantage of hospital services if public assistance programs are inadequate. Some active children, disinterested and bored, are sure to turn to delinquency and cannot be helped to be law-abiding citizens if schools do not meet their needs and recreational facilities are lacking. And so on. Social needs are met by a network of interlocking institutions; hence a profession that is devoted to helping to remove the difficulties that stand in the way of individuals' use of institutions cannot avoid the responsibility of indicating where the weak spots in the network are to be found.

Not only is this the profession's responsibility to its clients and its supporters, but efforts directed toward the providing of adequate facilities are needed in order that the function of social work be carried out, for, obviously, individuals cannot be helped to solve their problems of social relationships when they are denied access to the services of social institutions.[7] It is not within the function of social work actually to

[7] An extreme example of this situation is to be found in the condition of migratory families and single workers during the 1930's. A U.S. Senate investigating committee reported that these people were isolated from normal community activities both by their enforced mode of travel and by community prejudice against them. The presence of "border patrol," extreme enforcement of vagrancy laws, difficulties put in the way of

provide the needed facilities or to reorganize those at present available, but it is often its task to arouse public interest and understanding and to seek the co-ordination of existing facilities and the provision of new ones. Sometimes this requires the kinds of activities that are classified as those of community organization; sometimes social action is necessary. Both of these kinds of activities become a part of social work, then, not as independent enterprises but as functionally related parts of the social work institution, activities that are required for the fulfillment of that institution's primary objective.

All in all, then, the fulfillment of social work's function requires not only the carrying on of activities directly with clients and on their behalf but also the provision of auxiliary services and the creation of conditions that make the rendering of these direct services to clients possible. The organizations through which services to individuals are to be rendered must be set up, financed, and administered. Correlation among the services of various social agencies and between them and other organizations in a community or larger geographical unit must be achieved. Social workers must be trained for the carrying out of their professional duties. The theory and practice of the profession must be advanced by research. Measures must be taken to bring the needs of the clients of social agencies to the attention of the rest of the public so that adequate facilities are provided for meeting their requirements. Underlying and motivating all these auxiliary activities, however, is the basic objective of social work, and the activities themselves become a part of the social work institution only when they are directed to its fulfillment.

Social Work as an Institution and as a Field of Practice

The differentiation, implied in the preceding analysis, between social work as an institution and social work as a practice clarifies one of the puzzling aspects of the question about the nature of social work. Viewed as an institution, social work embraces the whole complex of activities that are necessary to carry out its function. Some of these activities are not peculiar to social work (research, for instance, and administration), though they do attain a distinctive character by reason of the ends to which they are directed. Social action would appear to

their getting relief funds made their existence very miserable. Added to this were their deplorable living conditions, lack of medical care and health protection, and inadequate educational facilities. See *Senate Report Number 46,* Part II, 76th Congress, 1st session.

belong to this category. Its methods are not peculiar to social work,[8] nor does it seem justifiable to designate as social work all the social engineering that is required to adapt social institutions to human needs. Nevertheless, in so far as social action is made necessary by and is directed toward the promotion of the social work function, it, like research and administrative activities, is a part of the social work institution.

When the term social work is used to refer to a practice, it has a more restricted meaning. Used in that sense it denotes the complex of activities that is peculiar to the profession, that differentiates it from other occupational groups. Social work practice and the process it involves has been identified as centering around the psychological factors involved in giving and receiving help with the problems for whose resolution social agencies are set up.[9] This, it will be seen, is the subjective aspect of the proposition we have been stressing throughout our analysis of social work: that social work's peculiar contribution does not lie in giving relief or information or supervision or making arrangements whereby assistance of one kind or another is secured but rather in providing these and other forms of service on the basis of the complex of attitudes and circumstances that uniquely characterizes each individual case.

As to the problems for whose resolution social agencies were established, our analysis of social work's function would appear to make the foregoing definition of the social work process more specific by showing the common element in those problems or the common end for which the agencies were established. The common element is found in the difficulties that individuals encounter in meeting their needs through social institutions, and the common end of social agencies is to render help to individuals in overcoming or mitigating those difficulties. The difficulties, however, may be dealt with in many other ways by the individuals concerned (by denial, by aggression, by the use of their own initiative and resourcefulness or the advice of friends, by seeking solace in religion or action in combination with fellow

[8] Public health work, for example, also requires some activities of a social-action nature, and yet it is only as the term "public health" is used to cover all activities required for the promotion of its ends that lobbying and other political activities are a part of its program.

[9] For a philosophical and technical statement of this concept, see Jessie Taft, "The Relation of Function to Process in Social Case Work," *Journal of Social Work Process*, I, No. 1 (November, 1937), 1–18.

sufferers), and it is only as the individuals decide to seek the help of social agencies that the social work process comes into play.

Consideration will show, however, that for practicing social work in a professional manner the institutionalization of social work is required. This is evidenced, in the first place, by the fact that, although social work is of a person-to-person nature, it is not only made possible through social agencies but the services themselves are defined and limited by the charters of those agencies. Again, the provision of facilities through which the practice of social work is carried on requires authorization and organization, and, behind that, the presence of a body of values and customs that sanction this method of relieving social distress. Moreover, since social work skills are based on knowledge and not on individual intuition, a body of technical rules concerning them must be built up, and provision must be made for transmitting them from one generation of practitioners to another. In these and other ways the practice presupposes the institution, and the term, social work, should take both of these aspects into account.

The Future of Social Work

Will social work always be needed?

A clear perception of the institutional character and the function of social work provides an answer to another question that is frequently asked: is social work a by-product of the capitalist system and would it disappear if the economic difficulties said to grow out of that system were removed? It is obvious that under the present economic organization of society the utilization of many social institutions requires the possession of money, and many individuals' effective functioning in organized groups is handicapped by lack of funds. The majority of clients of family agencies seek social work assistance because they need money or its equivalent in order to fulfill their family duties. Financial difficulties are prominent among those that handicap patients' use of physicians' services. Poverty is a frequent cause of resort to foster home care of children, and it is an important factor in school maladjustment and delinquency.

Nevertheless, it is a common finding of social workers that, although lack of money occasions many of the appeals for assistance from social agencies and is an important cause of social maladjustment, it is frequently not the only factor standing in the way of the

effective utilization of social institutions. For example, many of the women who come to family welfare agencies for financial assistance are found to be concerned about their own role in the family, about their adolescent children's lack of family feeling, about their relationships with their own and their husbands' parents, about many other kinds of family problems. Many children who run away from home and come into the care of protective agencies have not only financial stringency as their grievance, and they need something more than an adequate allowance to solve their difficulties. Examples from many other fields of social work could be cited. The point we would make is that, although lack of money is one of the prime causes of cases coming to the attention of certain types of social agencies, even in these cases help is often given with many noneconomic problems that would continue to exist, whatever the economic organization of society.

In addition, most clients of certain types of social agencies or social work departments have problems of a nonfinancial character. With medical social workers patients may discuss their indecisions about whether or not to undergo medical treatment; with psychiatric social workers they may consider what kind of job to take and how to get along with their families. To visiting teachers children may tell why they dislike the principal and why they cannot study at home. In a child guidance clinic mothers may find courage to say that they wish Johnny had never been born. These are homely examples of the kind of universal problems with which social workers deal. That at present their help is more likely to be sought by the poor than by the wealthy is partly a matter of social tradition that attaches a stigma to charity and all that was ever associated with it.

If it is granted that social work deals with many problems that have always existed and will continue to exist regardless of the economic organization of society, it must still be explained why it developed so recently. One obvious explanation is found in the growing complexity of society. It has already been shown that doctors and teachers and judges found it increasingly necessary to have help in understanding and working with their charges as cities grew large and their population heterogeneous, specialization increased, and contacts were not long continued. From the clients' point of view the complexity was evidenced by the growing impersonality and remoteness of many relationships, by the speed with which decisions had to be made, as well as by the complicated array of services that were available. That social work developed first in the largest cities and only now is spreading

to rural areas is significant testimony to both of these sets of facts. It is apparently only when social organization becomes very complicated and social relationships impersonal that a social institution must develop to help individuals to make use of the institutions that have been set up in their behalf.

This, however, is only one part of the answer to the question of why social work is needed now and probably will continue to be increasingly needed in the future. The other part is to be found in the fact that along with the growing complexity of western European and American society has come a lessening in the hold of custom and authority over individual behavior. Again it is significant that social work has found its chief sphere of usefulness in cities, and particularly in American cities, for it is there that individuals have had most freedom, and their actions have been least bound by convictions—their own and other people's—of what is right, proper, and necessary. Individuals have been increasingly called upon to devise their own standards, to make their own decisions as to whether they shall endure pain and discomfort and follow or not follow customary rules and values. Increasingly fewer of life's problems have been decided for them in the form of norms which they must abide by whether they want to or not. This stress on individualism has had its advantages, but it has also entailed painful doubt and left many without the ability to act with conviction in social situations.

There are other reasons, too, for the emergence of social work during the past hundred years. The increasing hold of the humanitarian philosophy is always listed as one of them, and the growing desire to give effective expression to democratic ideals as another. Then, too, the increase in knowledge about social and psychological dynamics is always mentioned, and it is pointed out that one profession after another has come to recognize that its ability to give effective service is often handicapped by factors that block clients' participation. Other reasons for the spread of social work could doubtless be adduced. A sufficiently broad philosophical perspective would show, however, that all of these reasons are interrelated and that social work, like all other social phenomena, is a part of a cultural mosaic in which all forces are mutually influential.

A prediction as to the future need for social work must accordingly take many intangible factors into account. If authoritarianism increases, individual happiness is held of less importance, and social values again prescribe rigid codes of conduct to which most individ-

uals submit with satisfaction, it may be that the need of individuals for help in solving social difficulties will decline—or at least will not be sanctioned by the public at large. On the other hand, it seems unlikely that even such changes in social philosophy would re-establish the simpler social organization of earlier days, in which long-continued, face-to-face associations provided group members with that knowledge of each other's peculiarities and purposes that social work now seeks to provide. However that may be, it seems likely that, in the absence of radical change in social organization and social values, social work will have a growing area of usefulness and will increase the scope and quantity of its services with the years.

Social work and the war

This conclusion may seem to savor of "business as usual" and to overlook the extreme changes in social conditions that the war and a period of postwar reconstruction will involve. What those changes will be cannot be predicted with any accuracy; hence it is rather foolhardy to attempt to show what changes or modifications in social work services will be required. If, however, our analysis of the fundamental task of social work is valid, it should provide some clues to future developments as well as account for those of the present and the past.

The most general answer that our analysis of social work's function provides is that special wartime and postwar services from social workers will be called for wherever the war makes it more difficult for individuals to play their accustomed roles in organized groups or to make use of or secure those groups' services. The list of such possibilities is long, as even a brief consideration of some of them will show.

Let us take first the changes that the period is likely to produce, has already produced, in family life. That there is much disturbance in the usual family arrangements seems almost too obvious to mention. Fathers are in the army or out of the home for other occupational reasons. Many mothers who normally stayed at home are employed. Other mothers who have previously contributed to the family income have had to give up their jobs because domestic servants are so scarce. Children are unsupervised or are being cared for by people, in or out of the home, to whom they are unaccustomed. Long and unconventional working hours are disruptive of family routine. In many cities houses have become scarce, with the result that many families are living in more cramped quarters than those to which they are accustomed or they are sharing their living space with relatives or strangers—either of

which conditions may become a source of tension. Many families have become migrants, going from town to town as the jobs develop or as the exigencies of wartime production demand. These and other new conditions create problems in family life that are likely to enlarge greatly the work of family welfare and child welfare agencies.

The difficulties thus created are not only those obvious ones with which social agencies traditionally deal through arranging for the daytime care of children, providing visiting housekeeper service, helping clients to improve their housing arrangements, and so on. The war conditions—and probably the postwar conditions—involve a change in values, a threat to prevailing standards that many individuals find hard to accept. A mother's working outside the home at a war job, for instance, may mean much more to her than a question of how she shall have her children cared for. She may find herself torn between what she regards as her patriotic duty—or her first opportunity in many years to have sufficient income—and her duty toward her children. Her husband's attitude toward her working may be involved, as well as her own earlier conception of what married life should afford. The children may have their own ideas and feelings about a mother's employment, and their attitudes—old-fashioned or new-fashioned as they may be—may also play a part in creating problems in family life. In attempting to give help to people with problems such as these, case workers will have to be especially careful not to let their own personal convictions about what is right and what is wrong stand in the way of assisting people to work out their own solutions to their difficulties, for a war period, in which social values undergo rapid change, affects both case workers and clients.

Family life is likely not only to be disturbed but actually disrupted by the war. In some cases, such as wartime marriages, it may never get a real start. In others, families will be broken by death or long-time separation. The evacuation of children may be called for. The evacuation of certain "alien enemy" groups has already taken place. There may be loss of homes and family members through the destructive forces of war itself. Social work activities will be called for in mitigating some of the effects of this disruption by providing an opportunity for the people concerned to describe the individual nature of their problems and to help them to secure and make use of the various services provided in their behalf.

The problems that individuals face in these situations have subjective as well as material aspects. An example of how complicated the

subjective aspects may be and how they may call for the kind of help a case worker can render is given in an article written by a London psychiatrist who had much experience with the evacuation of children. He points out that "however much the vastness of the problem may tempt the authorities to make rules and regulations intended to be a matter of general application, evacuation remains a matter of a million individual human problems, each different from the others, and each urgently important to someone." Among these problems, as far as the mothers are concerned, may be that of relinquishing much that makes daily life worth while—daily and hourly contact with their children during the period of most rapid development and greatest need for maternal care. Having solved that problem—having worked out a *modus operandi* that excludes the care of children—mothers may later be faced with another difficulty: that of putting back into the daily routine of their lives the care of their children, who by that time may be greatly changed. All in all, the author concludes, "when a child is taken from parents the very strongest feelings are aroused. Those who are concerned with the problem of evacuation of children must see the mothers' problems as well as those of the foster mothers if they are to understand what they are doing. To look after children may be hard and exacting work; it can feel like a war job. But just to be deprived of one's children is a poor kind of war work, one which appeals to hardly any mother or father and one that can only be tolerated if its unhappy side is appreciated." [10]

Social work services may also be needed in connection with disaster relief and with large-scale movement of families that may be occasioned by the drafting of man power for industry or agriculture. In such situations the practical, material difficulties of clients might appear to outbalance the subjective ones, but a little thought about how it might feel to be suddenly uprooted from home by bombing, internment, or compulsory job assignment will indicate that both aspects of the situation are involved. In giving assistance with these problems, as with those previously described, all kinds of social work services will be required. Starting with the initial case work aspects of the job—the discovery of the nature of the practical and the subjective difficulties of individual clients—those who are planning social work services will have to pay particular attention to community organization, for much co-ordination of efforts will be required to provide and

[10] D. W. Winnicott, "The Deprived Mother," *Children in War-time*, New Education Fellowship, Latimer House, Church Street, London, W.4., 1941.

make available the facilities that are needed to preserve or restore family well-being.

The family is, of course, not the only social institution in which individuals may experience change or pressures due to war and postwar conditions, with the resultant emergence of problems with which the kind of help social workers can render may be required. Another large area of possible social work service is that which concerns the relationship of individuals to their jobs. Under this heading may be included both military and civil employment. In neither of these has a need for social work been widely recognized, but the increasing demand for efficiency in the production of goods and services and the increasing pressure under which individual workers operate may alter that situation, especially if social workers can make clear to employers and military authorities the nature and value of their work.

It is accepted by the highest military authorities that very specific vocational aptitudes, including those of personality, are required for the effective carrying out of military duties under the conditions of modern warfare. Recognition of this fact makes the proper selection of men for service a particularly important part of military efficiency. Numerous factors should be taken into consideration in each individual case, important among which are the draftee's ability to get along with other people and work with them, his initiative and reliability, his capacity to operate under pressure and in crisis situations, and so on. It has been suggested—and found in a few localities—that social workers can obtain this kind of information for use by induction board psychiatrists; and it is believed that the resulting superior selection of military personnel would lead to heightened morale, more efficient military service, and a marked reduction in neuropsychiatric casualties.

If such a highly selective program were entered upon (and it is in operation to some extent), there would also be need for social work with and concerning the men who are rejected. Case work with these individuals and their families is called for in many cases, both in helping them to understand and accept the reasons for rejection and the fact that inability to do one kind of work does not connote psychological inferiority or inability to be useful in other capacities, and in assisting them to readjust to community life. The Home Service units of the Red Cross do some work of this nature, and trained case workers are being added to their staffs in many localities. In addition to case work there is also need for social work's service of community organization in regard to this problem, for "education" of the public is called

for, as well as the mobilization of various community resources in the clients' interests.

Social work in connection with military employment would not need to be limited to its selective aspects. There would seem to be much room for the employment of social case work and perhaps social group work [11] skills in army camps and naval training stations. Here again the Red Cross is already carrying on some such work through its "field directors." The need for social work services in this area is occasioned by the fact that many men's efficiency and comfort and morale on the job are handicapped by worries and fears and dissatisfactions that could often be overcome through discussing them with a social worker and securing his help in straightening out difficulties at home and in camp.

In much the same ways social work services could be used in connection with job placement and job adjustment in civil life. War conditions accentuate the need for such services. Compulsory job assignment would make the problems of adjustment to a job particularly acute, but even without that drastic change in customary procedures there is much about work conditions in wartime that increases tensions and anxieties and creates practical problems that reduce individual efficiency. Among these conditions are long hours, increased speed of operations, pressure for greater production, the letdown that comes when the "glamour" of a war job disappears, the breakup of families, the uncomfortable living quarters and transportation facilities, and so on, all of which frequently lead to discouragement, taut nerves, and general inefficiency. The opportunity to talk to a social worker about these adverse conditions and to secure his help in altering some of them would not restore every worker to the pink of condition, but in many cases much could probably be accomplished, and industrial management itself would benefit from knowledge of where the sources of some dissatisfactions lie.

Another rather new area for social work services that wartime conditions have created is that which concerns the adjustment of individuals to new communities and their ways of life. Several different types of persons find need for such services. One large group consists of refugees from foreign countries. Another is formed by those numerous citizens whose wartime jobs take them to parts of the United States

[11] We are here using the term "social group work" in the way it has been defined in previous chapters—see particularly Chapter XIV—and are not referring to educational and recreational activities.

where the manners and customs are very different from those to which they are accustomed. Then there are the expatriates whom the war has brought home after many years of residence abroad. Any dislocation of persons from their accustomed habitats and ways of life brings with it problems of a practical and a subjective nature, and social work services to such individuals may range from giving them information about the new community's social and economic resources to counseling with them in regard to ways of meeting the unfamiliar new conditions.

In addition to these (and other) more or less new areas of social relationships in which social work services may be required, there will undoubtedly be call for an expansion of present services. Large numbers of medical and psychiatric social workers are needed in the military hospitals and in the expanded mental and physical health programs of public welfare authorities. Crowded school conditions in "defense areas" makes the services of visiting teachers increasingly important. For various reasons delinquency is likely to increase under war and postwar conditions. Since much of this increase will be due to adverse social conditions rather than to serious psychological maladjustment, social work services will be especially called for in order to help these children to find socially acceptable ways of living in the disturbed war and postwar world. Other examples of probably increased need for social workers can readily be found, for war accentuates all the social maladjustments and the disturbed social relationship that originally called social work into being.

One other question regarding the future of social work must, however, be considered: whether under such seriously disturbed social and economic conditions there would be time for the kind of activities of which social work, and particularly social case work, consist. This important question cannot be discussed in detail here, for many technical problems, beyond the scope of our analysis, are connected with it. It is clear, however, that there are two aspects to the matter.

On the one hand, time—or, rather, the quantity of service to be made available—is not considered an insuperable barrier to the maintenance of a professional service when the importance of that service is fully recognized. The clearest example in support of that statement is medical service. War conditions greatly enhance the need for physicians, but nobody suggests that the attempt to supply the army and the civilian population with medical care should be given up because there are too many people to be served. Even under the direst of

conditions, medical services would be maintained, although drastic changes might be required in their manner of functioning. Following this reasoning we would conclude, then, that great efforts will be made to continue social work services if the public becomes convinced that they are of vital importance.

On the other hand, the probability of great change in the conditions under which social workers operate and the necessity of making their services available to many more people than in the past require that social workers consider carefully what are the essential elements and what the nonessential elements in their professional practice. This is a question that the profession itself must answer, but our analysis would lead us to conclude that the main clue is to be found in the institution's primary function. To give effect to the aim that that function connotes under the stress of wartime conditions may necessitate considerable change in technical methods and in the manner of training personnel, and much of the rather leisurely process of becoming acquainted with clients and their needs may have to be dispensed with. Nevertheless, it seems very doubtful that the fundamental values on which the profession operates will have to be altered; and it seems likely that a clear perception of the task of helping individuals with the specific difficulties they meet in making use of particular social institutions will make possible that refinement of practice upon which the possibility of serving large numbers of people depends.

General conclusion

The future of social work, however, need not be considered only in terms of wartime conditions. Our analysis has shown that social work has a scope for its activities in connection with any social institution in whose work individuals find difficulty in participating or whose services they find hard to use. The institution of charity was the first in which need for social work's particular kind of help was manifested, and the institution of the family is the one in connection with which its chief development has taken place. Throughout social work's development, economic difficulties have been found to be most prominent among the problems that bring clients to the attention of social agencies—a fact that is not surprising in a culture in which much of social participation depends upon the possession of money. Nevertheless, social work's techniques are not limited to the resolution of individuals' financial problems nor would the provision of adequate funds to everybody insure such adequacy of social functioning that social

work would not be needed. Under conditions of wartime or peace, prosperity or depression, capitalism or communism, social work has a role to play so long as individuals have some freedom in deciding what course of action to pursue in relation to social institutions and need some assistance in working out ways of dealing with their social difficulties.

This, then, is the answer in general terms to the question with which our investigation started. In social work's institutional structure and in its function in relation to individuals and to other social institutions, a definition in dynamic terms seems to have been found. The utility of such a definition, we said at the outset, lies in the assistance it gives in solving subsidiary problems, and at various points throughout the analysis we have attempted to use the definition in that way. Most of the problems we have thus explored are in need, however, of much more detailed analysis, and the investigation's chief accomplishment lies in the general proposition in regard to the nature of social work rather than in the specific deductions that have been drawn from it.

Suggestions for Further Study

Social work and social welfare

Abbott, Edith, *Social Welfare and Professional Education,* University of Chicago Press, Chicago, 1931.

"The term 'social welfare' rather than 'social work' is used designedly because social welfare is a broader term emphasizing the public aspects of social service and the development of social policies as well as methods of social treatment." (Preface, p. vii.) In spite of this distinction the book presents most convincingly the point of view of those who view social work as the means through which social welfare in all its aspects is professionally promoted. See particularly Chapters II and IV.

Anderson, Nels, "Sociology and Social Work in Public Welfare Administration," *American Sociological Review,* VI (1941), 177–84.

A discussion of the assets and disabilities of social workers in public welfare programs. The article implies a distinction between social work and public welfare administration in the opinion of an actual administrator, and also a recognition that social workers have a special part to play in such organizations. These points, however, are not made wholly explicit.

Chapin, F. Stuart, *Contemporary American Institutions,* Harper & Brothers, New York, 1935.

The function of social work is here described as meeting the needs of individuals who are not served by the basic social institutions.

Queen, Stuart Alfred, *Social Work in the Light of History,* J. B. Lippincott Company, Philadelphia, 1922, pp. 307–22.

An interpretation, in the terms of Mead and Cooley, of why social work is needed and what its distinctive contribution is.

Stevenson, Marietta, *Public Welfare Administration,* The Macmillan Company, New York, 1938.

A simple description of the present organization of public welfare activities and the problems and principles of administration. This writer says, "Public welfare means tax-supported social work provided as a function of government."

Administration

Atwater, Pierce, *Problems of Administration in Social Work,* University of Minnesota Press, Minneapolis, 1940.

Describes the administrative activities that are necessary to keep social agencies functioning well: relations of executive with staff, board and committee members, and the community; budgets and personnel policies; research, public relations, publicity, and so on.

Dunham, Arthur, "Administration," *Social Work Yearbook* (1941).

Points out three different approaches to administration and the duties of administrators.

Glassberg, Benjamin, *Across the Desk of a Relief Administrator,* American Public Welfare Association, 1313 East 60th St., Chicago, 1939.

An administrator's diary, showing the great variety of decisions and judgments that are required in order to give effective expression to public relief laws. Of special interest because it demonstrates that most of the problems that come to the attention of a public relief administrator are not concerned with the carrying out of the social work function.

Pray, Kenneth, "The Agency's Role in Service," *Training for Skill in Social Case Work,* University of Pennsylvania Press, Philadelphia, 1942.

Shows specifically why administration is a part of social work, as defined in this book.

Towle, Charlotte, "Professional Skill in Administration," *The Newsletter* (Tenth Anniversary Number), American Association of Psychiatric Social Workers, 1790 Broadway, New York, pp. 11–17.

Of special value in showing that all members of an agency's staff have a part in policy making and policy testing, and that case work and administrative functions cannot be wholly separated without doing harm to both agency and clients.

Community organization

Brown, Josephine C., *The Rural Community and Social Case Work,* Family Welfare Association of America, 130 East 22d St., New York, 1933.

A simply written book, addressed largely to the layman, that tells why social work is needed in rural areas and how to proceed in organizing a social agency and in carrying on the administrative aspects of its work. There is a brief chapter on rural case work, in which some of the peculiarities of social work under rural conditions are listed.

Burnett, Mary Clarke, "The Role of the Social Worker in Agency-Community Relationships," *Proceedings of the National Conference of Social Work* (1941).

Describes the social work aspects of community organization and shows why community organization for the carrying on of social work services should be based on the same set of values and principles that guide social case work.

Byington, Margaret, *Organizing a Public Welfare Committee in Spring County,* Columbia University Press, New York, 1941.

A condensed record of the community organization activities of the New York State Charities Aid Association in a semirural county—a narrative account with verbatim extracts from field workers' reports.

Deardorff, Neva R., "Areas of Responsibility of Voluntary Social Work during a Period of Changing Local and National Governmental Programs," *Proceedings of the National Conference of Social Work* (1936).

Able discussion of the relation of planning to the development of community welfare programs.

Dunham, Arthur, "The Literature of Community Organization," *Proceedings of the National Conference of Social Work* (1940).

Evaluative comments on the literature in this field. The author arrives at the conclusion that the literature is "pathetically meager" and that there is little unity in approach.

Persons, W. Frank, *The Welfare Council of New York City,* published by the Council, 1925.

A hundred-page brochure issued by the Council at the time of its founding. Analyzes the chief objectives of community organization for social welfare. Forms the basis for the 1939 National Conference of Social Work report on the same subject.

White House Conference on Child Health and Protection, 1930, *Organization for the Care of Handicapped Children,* D. Appleton-Century Company, New York, 1932.

Section entitled "educational publicity for promoting social work programs" is said by Dunham (see above) to be the "most substantial contribution yet to be made to the subject of community organization by public welfare agencies." Note that in this and the preceding reference social work and public or social welfare are regarded as equivalent terms.

Wood, Martha C., "The Effective Organization of Social Forces in Small Towns and Rural Communities," *Proceedings of the National Conference of Social Work* (1941).

Problems calling for social work and the attitudes of the community toward them in typical rural areas; a description of some of the ways in which this situation was dealt with through community organization.

Social action

Fitch, John, "The Nature of Social Action," *Proceedings of the National Conference of Social Work* (1940).

An attempt to define social action and to describe social work's role in it. Supports the thesis that "social work logically tends to become a social reform movement."

Reynolds, Bertha Capen, "Re-thinking Social Case Work," *Social Work Today,* Vol. V (1936).

A critical evaluation of the basic concepts of social work. An excellent, brief analysis of the subject, leading to a plea for applying the accepted case work philosophy to the solution of wider social problems.

New fields and new problems for social work

Body, Alfred H., *Children in Flight,* University of London Press, 1940.

Short, popular account of how the program for the evacuation of London children was actually carried out and how the children and their parents and foster parents responded to it.

Calder, Ritchie, *The Lesson of London,* Becker and Warburg, London, 1941.

How London first met the *Blitzkrieg,* and the social problems it produced.

Padley, Richard, and Margaret Cole, *Evacuation Survey,* George Routledge & Sons, Ltd., London, 1940.

History of the scheme for the evacuation of children from London, and the problems that it entailed—with particular reference to education, family life, nutrition, and psychological problems. Pages 186–96 on "psychiatric aspects" are particularly pertinent, not only to evacuation but to all war activities that disrupt family life.

Roethlisberger, F. J., *Management and Morale,* Harvard University Press, Cambridge, 1942.

"For the industrial leader," says the author, "there is nothing more important than an understanding of the sentiments which bind individuals together in social groups." Improved output and improved morale in industry were found to follow when personnel workers gave employees an opportunity to discuss their problems about their jobs, their health, and their general well-being. Although the author does not make the point, it is apparent that the activities described were essentially those of social case work in industry. It may be that future social work developments in this direction are to be anticipated.

Strachey, Amy St. Loe, *Bereaved Children,* Commonwealth Fund, New York, 1940.

"A popular account of some evacuation problems and their remedies." A survey of the kinds of behavior difficulties evacuated children displayed and how social work services in their behalf were organized and administered.

For current developments in social work, see the following journals: *The Child, The Compass, The Family, Bulletin of the Child Welfare League of America, Social Security Bulletin, Social Service Review, The Survey, Smith College Studies in Social Work.* Also the annual issues of *The Social Work Yearbook* and *The Proceedings of the National Conference of Social Work.*

APPENDIX

SOCIAL WORK AS A CAREER[1]

The field of social work offers interesting possibilities to men and women wishing to go into a profession whose primary concern is with people and their social needs. Those who are interested in a field of activity where character, education, training, and skill are important to its continuous development should find social work attractive.

Social workers in the United States are found in every type of tax-supported and voluntary activity which has to do with the welfare of human beings who for one reason or another (physical or mental illness, unemployment, death, desertion, instability, foreignness) suffer from interruption in the conduct of their own lives and activities in the social structure and who are thus led to seek personal assistance and supplementary resources.

Social workers are employed by private social agencies and by governmental departments under federal, state, county and city auspices; by citizens' committees, civic organizations, and religious denominations; by schools, hospitals, courts, and industrial bodies. They work in rural districts and in cities of every size.

With the rapid development of social work under both private and public auspices, the importance of improving the quality of service through the employment of professionally trained persons has been increasingly recognized. As a result, there is a steadily growing demand for properly qualified men and women to fill positions in social work. . . .

Preparation

Schools of social work have been organized to meet the demand from social agencies for personnel with professional qualifications. The development of formal training and the demand for it are in line with professional education and requirements in other fields, such as law, medicine, teaching, and nursing. Schools of social work are organized into an association known as the American Association of Schools of Social Work, the current members of which are listed below.

[1] Reprinted, by permission, from a leaflet issued by the American Association of Social Workers, October, 1940.

The social worker needs a well-rounded college education. Too early specialization is not recommended. A good basis for graduate professional training can be most advantageously laid during undergraduate study. The courses of immediate importance for the undergraduate student are those in social and biological sciences. The value of these background courses has been recognized by the Association of Schools of Social Work and the American Association of Social Workers. The requirements of both associations emphasize such courses as sociology, economics, political science, psychology and philosophy, anthropology and biology. A broad cultural background provided by other courses and a vital interest in current events are also important.

In the professional schools, courses are offered in theory and practice of social work, together with courses in the sciences which social work must adapt to its purposes. Supplementing the courses, supervised experience is offered through accredited social agencies in working association with the schools. In the agencies the student not only observes the work that is done, but also assumes practical responsibilities under supervision. The combination of theoretical and practical training tests out the student's aptitude for social work. A genuine liking for people and a scientific attitude are essential. A student who lacks these qualifications is not encouraged to continue training for the field of social work.

The length of time spent in a professional school varies from one to three years, depending on whether or not the student desires to secure an advanced degree. A minimum of two years of full-time study is required for an advanced degree. Since October, 1939, the accredited professional schools have been on a graduate basis. Many schools offer scholarships or fellowships to promising students who need financial assistance in securing professional education.[2]

Opportunities for responsible positions and advancement in social work are more and more dependent upon the degree of professional competence the worker has developed through professional education and self-development on the job. The number of graduates from schools of social work is inadequate to meet the demands of the field.

Civil service systems are being extended and civil service requirements for positions in the established public welfare departments are

[2] A list of the available scholarships and fellowships is printed annually in *The Compass*, the journal of the American Association of Social Workers, 130 East 22d. St., New York. Reprints can be secured from the Association; price, ten cents.

steadily moving to higher levels to include as much professional training in a school of social work as is now required for admission to the American Association of Social Workers.

Private agency requirements for personnel are being steadily raised, and such agencies are giving increasing attention to provisions for staff opportunity for professional advancement.

Salaries

Social work salaries are not large, but positions of responsibility and a reasonable standard of living are assured the personally qualified social worker with professional education. Beginning salaries vary according to the community and whether or not a worker has had training in a professional school. Most positions in social work pay from $1500–$2500. Men and women who take professional training and are interested in advancement can look forward to supervisory or executive positions paying from $2400 to $5000 a year. A limited number of special positions paying higher salaries are open to social workers with a record of successful experience and administrative ability.

Professional Organization

On October 1, 1940, there were approximately 11,500 social workers in the membership of the American Association of Social Workers. Membership in the Association is on a selective basis which, in the absence of legal registration or certification for social workers comparable to that in the medical, nursing, or teaching fields, operates as the only certifying process on a national scale. The membership requirements call for a specified amount of academic preparation, professional education in a school of social work, and experience in the practice of social work.

For further information consult:

American Association of Social Workers, 130 East 22d St., New York.

American Association of Medical Social Workers, 844 Rush St., Chicago, Ill.

American Association of Psychiatric Social Workers, 1790 Broadway, New York

American Association for the Study of Group Work, 381 Fourth Ave., New York.

American Association of Schools of Social Work, School of Applied Social Sciences, University of Pittsburgh, Pittsburgh, Pa.

Any of the schools on the following list of member schools in the Association.

Social workers in your community.

Members of the American Association of Schools of Social Work [8]

Two-year graduate schools

ATLANTA UNIVERSITY SCHOOL OF SOCIAL WORK
Forrester B. Washington, *Atlanta, Georgia*

BOSTON COLLEGE, SCHOOL OF SOCIAL WORK
Rev. Walter McGuinn, S.J., *Boston, Mass.*

BOSTON UNIVERSITY, SCHOOL OF SOCIAL WORK
Richard K. Conant, *Boston, Mass.*

BRYN MAWR COLLEGE, CAROLA WOERISHOFFER GRADUATE DEPARTMENT OF SOCIAL ECONOMY AND SOCIAL RESEARCH
Mildred Fairchild, *Bryn Mawr, Pa.*

BUFFALO, UNIVERSITY OF, SCHOOL OF SOCIAL WORK
Niles Carpenter, *Buffalo, N. Y.*

CALIFORNIA, UNIVERSITY OF, DEPARTMENT OF SOCIAL WELFARE
Harry M. Cassidy, *Berkeley, California*

CARNEGIE INSTITUTE OF TECHNOLOGY, DEPARTMENT OF SOCIAL WORK
Mrs. Mary C. Burnett, *Pittsburgh, Pa.*

CATHOLIC UNIVERSITY OF AMERICA, SCHOOL OF SOCIAL WORK
Rev. Thomas E. Mitchell, *Washington, D. C.*

CHICAGO, UNIVERSITY OF, SCHOOL OF SOCIAL SERVICE ADMINISTRATION
Helen Wright, *Chicago, Illinois*

DENVER, UNIVERSITY OF, DEPARTMENT OF SOCIAL WORK
Florence W. Hutsinpillar, *Denver, Colorado*

FORDHAM UNIVERSITY, SCHOOL OF SOCIAL SERVICE
Anna E. King, *805 Woolworth Building, New York City*

INDIANA UNIVERSITY, TRAINING COURSE FOR SOCIAL WORK
Louis E. Evans, *Indianapolis, Indiana*

LOUISVILLE, UNIVERSITY OF, GRADUATE DIVISION OF SOCIAL ADMINISTRATION
John J. Cronin, *Louisville, Kentucky*

LOYOLA UNIVERSITY, SCHOOL OF SOCIAL WORK
Rev. Elmer A. Barton, *Chicago, Illinois*

MICHIGAN, UNIVERSITY OF, CURRICULUM IN SOCIAL WORK
Robert W. Kelso, *40 East Ferry Street, Detroit, Mich.*

MINNESOTA, UNIVERSITY OF, GRADUATE COURSE IN SOCIAL WORK
Gertrude Vaile, *Minneapolis, Minnesota*

MONTREAL SCHOOL OF SOCIAL WORK
Dorothy King, *Montreal, Canada*

NATIONAL CATHOLIC SCHOOL OF SOCIAL SERVICE
Rev. Lucian L. Lauerman, *Washington, D. C.*

[8] List as of March, 1942.

NEBRASKA, UNIVERSITY OF, GRADUATE SCHOOL OF SOCIAL WORK
Frank Z. Glick, *Lincoln, Nebraska*

NEW YORK SCHOOL OF SOCIAL WORK, AFFILIATED WITH COLUMBIA UNIVERSITY
Walter W. Pettit, *122 East 22nd Street, New York City*

NORTH CAROLINA, UNIVERSITY OF, DIVISION OF PUBLIC WELFARE AND SOCIAL WORK
Roy M. Brown, *Chapel Hill, N. C.*

OHIO STATE UNIVERSITY, SCHOOL OF SOCIAL ADMINISTRATION, GRADUATE PROGRAM
Charles C. Stillman, *Columbus, Ohio*

PENNSYLVANIA SCHOOL OF SOCIAL WORK, AFFILIATED WITH UNIVERSITY OF PENNSYLVANIA
Kenneth Pray, *311 South Juniper Street, Philadelphia, Pa.*

PITTSBURGH, UNIVERSITY OF, SCHOOL OF APPLIED SOCIAL SCIENCES
W. I. Newstetter, *Pittsburgh, Pa.*

SAINT LOUIS UNIVERSITY, SCHOOL OF SOCIAL SERVICE
Rev. A. H. Scheller, S.J., *Saint Louis, Missouri*

SIMMONS COLLEGE SCHOOL OF SOCIAL WORK
Katharine D. Hardwick, *18 Somerset Street, Boston, Massachusetts*

SMITH COLLEGE SCHOOL FOR SOCIAL WORK
Everett Kimball, *Northampton, Massachusetts*

SOUTHERN CALIFORNIA, UNIVERSITY OF, GRADUATE SCHOOL OF SOCIAL WORK
Arlien Johnson, *Los Angeles, California*

TORONTO, UNIVERSITY OF, SCHOOL OF SOCIAL WORK
Stuart K. Jaffary, *Toronto, Canada*

TULANE UNIVERSITY, SCHOOL OF SOCIAL WORK
Elizabeth Wisner, *New Orleans, Louisiana*

WASHINGTON UNIVERSITY, GEORGE WARREN BROWN DEPARTMENT OF SOCIAL WORK
Frank J. Bruno, *Saint Louis, Missouri*

WASHINGTON, UNIVERSITY OF, GRADUATE SCHOOL OF SOCIAL WORK
Ernest F. Witte, *Seattle, Washington*

WESTERN RESERVE UNIVERSITY, SCHOOL OF APPLIED SOCIAL SCIENCES
Leonard W. Mayo, *Cleveland, Ohio*

WILLIAM AND MARY, COLLEGE OF, RICHMOND SCHOOL OF SOCIAL WORK
Henry Coe Lanpher, *Richmond, Virginia*

One-year graduate schools

HOWARD UNIVERSITY, GRADUATE DIVISION OF SOCIAL WORK
E. Franklin Frazier, *Washington, D. C.*

LOUISIANA STATE UNIVERSITY, GRADUATE SCHOOL OF SOCIAL WELFARE ADMINISTRATION
R. E. Arne, *University, Louisiana*

OKLAHOMA, UNIVERSITY OF, SCHOOL OF SOCIAL WORK
J. J. Rhyne, *Norman, Okla.*

UTAH, UNIVERSITY OF, SCHOOL OF SOCIAL WORK
Arthur L. Beeley, *Salt Lake City, Utah*

WEST VIRGINIA UNIVERSITY, DEPARTMENT OF SOCIAL WORK
Emil M. Sunley, *Morgantown, West Virginia*

INDEX

A

Abbott, Edith, *Public Administration,* discussed, 244
Social Welfare and Professional Education, discussed, 46, 512
Some American Pioneers in Social Work, discussed, 244, 307
———, Grace, *The Child and the State,* discussed, 307
From Relief to Social Security, discussed, 244
The ABC of Foster-family Care for Children, discussed, 353
Administration, as part of social work, 184
Adoption, as family substitute, 88
and social work, 89
Adoption Practice, discussed, 353
Advice, as social work service, 25, 98
Aged persons, as clients of social agencies, 26
family substitutes for, 88
public assistance for, 239–40
Aid-to-dependent children program, classification, 313
function, 313
objectives, 313–14
origin, 294–95
services, 309 ff.
and social work, 310 ff.
Allen, Frederick, "Evolution of Our Treatment Philosophy in Child Guidance," discussed, 480
Almsgiving, as poor relief, 130
see also Poor relief
Almshouse, *see* Workhouse
American Association for the Study of Group Work, address, 522
American Association of Charity Organization Societies, and "Iowa plan," 215
American Association of Medical Social Workers, address, 521
American Association of Psychiatric Social Workers, address, 521
American Association of Schools of Social Work, address, 522
membership, 522–23
training program, 520
American Association of Social Workers, address, 521
admission requirements, 520–21
membership, 521
and schools of social work, 51
training program, 520
American Female Guardian Society, 291
Americanization, as social group work activity, 31–32
American Red Cross, *see* Red Cross
Anderson, Nels, "Sociology and Social Work in Public Welfare Administration," discussed, 512
"Appraising the Social Security Program," discussed, 244
Aquinas, Thomas, on dependence of individual on social organization, 76
Arensburg, Conrad M., *et al., Family and Community in Ireland,* discussed, 84
Arizona, relief administration in, 222
Ashley, W. J., *An Introduction to English Economic History and Theory,* discussed, 154
on medieval charity, 131–32
on poor law, 132
Atwater, Pierce, *Problems of Administration in Social Work,* discussed, 206, 513

B

Baltimore, poor relief in, 158
Barnett, Canon, on poor relief, 146–47, 152
on poverty, 146, 152
on principles of social work, 146
on social case work, 147
on social work, 148–49
———, Henrietta Octavia, *Canon Barnett: His Life Work, and Friends,* discussed, 154
Beers, Clifford, *A Mind That Found Itself,* discussed, 456
Beggars, in the Middle Ages, 131, 132
Big Brother and Sister Organizations, activities, 396
Birtwell, social worker, 299 ff.

Blanchard, Phyllis, *et al.*, "Case for Symposium," discussed, 481
Blind persons, public assistance for, 240
Boarding homes, as family substitutes, 88
history, 292 ff.
and social work, 89
Body, Alfred H., *Children in Flight,* discussed, 515
Bosanquet, Helen, on economic conditions in 19th-century England, 140–41
Social Work in London, discussed, 154
Boston, poor relief in, 158
Boston Children's Aid Society, activities, 293, 297 ff.
first engages in social work, 297 ff.
objectives, 303
Boy Scouts, educational activities, 95
membership, 33
offers social group activity, 31
Boys' and girls' work organizations, activities, 196–97
see also Boy Scouts, Y.M.C.A., Y.W.C.A.
Brace, Charles Loring, on child welfare, 291
Brackett, Jeffery, on objectives of charity organization societies, 162–63
Brandt, Lillian, *et al., American Social Work in the Twentieth Century,* discussed, 46, 181
Breckinridge, Sophonisba, *Family Welfare Work in a Metropolitan Community,* discussed, 180, 274
on public social agencies, 187
Brill, Jeannette, *et al., The Adolescent Court and Crime Prevention,* discussed, 420
Brooklyn Bureau of Charities, 163
Brown, Esther Lucile, *Social Work as a Profession,* discussed, 65
Brown, Josephine, on poor relief in the United States, 214
Public Relief, 1929–39, discussed, 244
The Rural Community and Social Case Work, discussed, 514
Browning, Grace, *et al., Social Case Records: Family Welfare,* discussed, 274
Buffalo Charity Organization Society, activities, 163
Bureau of Public Assistance of Social Security Board, on relief policies, 223–24
Burnett, Mary Clarke, on fund raising of social agencies, 36–37
"The Role of the Social Worker in Agency - Community Relationships," discussed, 514
Byington, Margaret, *Organizing a Public Welfare Committee in Spring County,* discussed, 514

C

Calder, Ritchie, *The Lesson in London,* discussed, 515–16
Cannon, Ida M., *Social Work in Hospitals,* discussed, 455–56
Case consultants, in family welfare agencies, 48
Case work, *see* Social case work
Cases, illustrative, *see* various headings
CCC, 3
Chalmers, Thomas, on poor relief, 142
Chapin, F. Stuart, *Contemporary American Institutions,* discussed, 44, 513
Character defect, as cause of poverty, 161
Charity, history, 139
medieval, as mass relief, 132
———, results of, 132
private, versus public relief, 216–17
as a social institution, 144
social work distinguished from individual, 50, 55–56, 62
unorganized, 150, 156
see also Poor relief
Charity organization societies, activities, 161, 163
aims, 161, 162–63, 164
social philosophy of, 160–61
in the United States, 159
work for social reform, 43
see also London Charity Organization Society
Charter, as part of social institutions, 51
of social work, 52 ff.
Cheyney, Alice S., defines social work, 7
Nature and Scope of Social Work, discussed, 17
Child-caring institutions, as family substitutes, 88
functions, 338-39
history, 288 ff.
objectives, 303 ff.
social work in, 26, 27, 109, 337 ff.
types, 338
Child guidance clinics, activities, 105
adopt psychiatry, 174, 178n.
delinquency, treatment of, in, 414
educational activities, 95
intake policy, 461–62
number in the United States, 458–59
origin, 458 ff.
and parents, 463 ff.
services, 459, 460 ff.
social case work in, 463 ff.
———, illustrative case, 470 ff.
social work in, 23, 26, 458 ff.
as social work laboratories, 458
staff composition, 459
teamwork in, 460
theory of, 460 ff., 465 ff.

Child guidance movement, origin, 438
Child placement, methods of, 28
Child placement agencies, and delinquents, 414
educational activities, 95
objectives, 347 ff.
organization, 59
personnel, 49
services, 350 ff.
Child study movement, origin, 171
Child welfare, defined, 277
discussed at White House Conference, 216
Child welfare agencies, and social work, 305 ff.
Child Welfare League of America, advisory services, 188
Child welfare services, administration, 195
organization, 195
Child Welfare Services in New York State, discussed, 353
Child welfare work, activities, 276, 277–78
agencies, 319 ff.
assistance, types of, 295, 308
in boarding homes, 293 ff.
and child-placing agencies, 348 ff.
with delinquents, 119
as distinguished from family welfare work, 276–77
economic factor in, 279 ff.
eligibility, 311–12, 320
"farming out," 285
financial assistance, 308 ff.
foster care, 331–32
in foster homes, 291 ff., 296n.
history, 283–84, 285 ff.
indenture, 285–86
indoor assistance, 294, 318 ff.
in orphan asylums, 288 ff.
outdoor relief, 285
in poorhouses, 286 ff.
protective work, 319–20, 321–22
———, illustrative case, 322 ff.
in schools, 356 ff.
services, 316 ff., 321 ff.
———, illustrative cases, 322 ff., 325 ff.
and social work, 282 ff., 297 ff., 308 ff.
Children, care of, by medieval charity, 132
as clients of social agencies, 22–23, 26
medieval care for, lack of, 280–81
needy, number of, in 1940, 295–96
under Poor Law, 139
psychology of, 389 ff.
schooling, lack of, for, 280
socialization of, 384, 387 ff.
and the war, 506–07
Children's aid societies, activities, 319
Children's Bureau, founded, 216
services, 195
Church, as a dispenser of charity, 130–31, 133
as a social institution, 130
Cincinnati Associated Charities, on family group work methods, 274–75
Clients of social workers, characteristics of, 22–23, 33
Cockerill, Eleanor, "The Use of Current Case Work Concepts," discussed, 456
Community centers, offer social group activities, 31
Community chests, 37, 51
membership, 202
purpose, 201–02, 203
research activities, 203–04
Community councils, activities, 169n.
Community life, and social group work, 32
Community organization, activities, 35 ff.
as aspect of social case work, 167
bibliography, 45–46, 514–15
co-ordinating activities, 37–38
defined, 35, 495
early, in Boston, 302
fund raising, 36
in London Charity Organization Society, 143
maintenance of facilities, 35
as part of work of individual agency, 37, 38, 204
planning of, 35–36, 203–04
principles of, 36 ff.
as social work activity, 20–21, 38–39, 123, 166–67, 204–05, 495 ff.
types, 201 ff.
Conferences of social work, 51
Conover, Merrill, "Use of Group Records of Local Agency," discussed, 379
Co-ordinating councils, 50–51
Correctional institutions, inmates of, as clients of social agencies, 23
services of, 199
social work in, 119, 415 ff.
———, illustrative case, 418 ff.
Cottage plan, describes, 370
Councils, co-ordinating social agencies, 38, 51, 201–02, 203, 204
Counseling, as social work service, 25
Courts, social work in, 26, 119
see also Juvenile courts
Coyle, Grace, defines social group work, 30
Social Process in Organized Groups, discussed, 45
Crusoe, Robinson, sociological analysis of, 70
Crutcher, Hester B., *A Guide for Developing Psychiatric Social Work in State Hospitals,* discussed, 456
Cultural conflicts, causes, 385 ff.

Culture, and customs, 72
defined, 69n.
differences in, as factor in adjustment, 79, 80
functional theory, 65
and knowledge, 71
and language, 71–72
and magic, 72
material apparatus, 70–71
and religion, 72
requirements, 70 ff.
and social group work, 31–32
Culture conflicts, in the United States, 116
Custodial institutions, as family substitutes, 87 ff.
history, 131, 139
inmates of, as clients of social agencies, 23
and social work, 89, 199
Customs, as obstacles to social adjustment, 79
as part of culture, 72

D

Darwin, Charles R., philosophy of, 160
Day nurseries, functions, 332 ff.
as social work services, 26, 199, 333–34
———, illustrative case, 334 ff.
Deardorff, Neva R., "Areas of Responsibility of Voluntary Social Work, etc.," discussed, 514
"Social Study by Councils of Social Agencies, etc.," discussed, 206
Defining Family Case Work Services, etc., discussed, 224
Definitions, nature and functions of, 8 ff., 11–12
Defoe, Daniel, *Giving Alms No Charity*, 154
Delaware, relief administration in, 222
Delinquency, causes, 384 ff.
cultural aspects, 385 ff.
psychological aspects, 389 ff.
and social case work, 397–98
———, illustrative cases, 398 ff.
and social group work, 33
and social work, 381 ff.
Delinquency, Juvenile, causes, 460
prevention of, and schools, 361–62
treatment of, 392–93
Delinquents, case work with, 119
Dependent children, public assistance for, 240–41
Depression of 1930's, and social work, 212, 217 ff.
deSchweinitz, Elizabeth McCord, defines social work, 7n.
———, Karl, *The Art of Helping People Out of Trouble*, discussed, 44
defines social work, 6–7
deSchweinitz, Karl, *Six Centuries of Poor Relief*, discussed, 154
Deutsch, Albert, *The Mentally Ill in America*, discussed, 456
Devine, Edward T., on aims of charity organization societies, 164
defines social work, 6
"Some Ideals Implied in Present American Programs of Voluntary Philanthropy," discussed, 65
When Social Work Was Young, discussed, 180
———, *et al.*, *American Social Work in the Twentieth Century*, discussed, 46, 181
Dewey, John, on conducting an investigation, 10 ff., 15, 487
The Theory of Inquiry, discussed, 17
Dexter, Elizabeth, "New Concepts and Old People," discussed, 244
Dietitian, in family welfare agencies, 49
Disaster relief, social work in, 23
social work in, 26
Discussion groups, as education, 106
as psychotherapy, 106
as recreation, 106
as social group activity, 32
as social work, 105–06
Dixon, Elizabeth, *et al.*, *Social Case Records: Family Welfare*, discussed, 274
Dunham, Arthur, defines community organization, 495
"The Literature of Community Organization," discussed, 514

E

Economic conditions, as cause of poverty, 162
Economic difficulties, as basis of social work, 23–24
Economic institutions, function of, 91, 128
supplements to, 91, 94, 128
Education, by discussion groups, 106
as distinct from social group work, 99–100
as distinct from social work, 272n.
function of, 74, 97, 98
informal, 369
Poor Law and, 139
as social group work, 30
and social work, 95 ff.
Educational institutions, inmates of, as clients of social agencies, 23
social work in, 20–21, 121
Eligibility, of applicant for social work service, 60–61
Elliott, Lulu Jean, *Social Work Ethics*, discussed, 65
Ely, Richard T., on environmental determinism, 162

Emergency relief administration, first established, 218–19
Emotional maladjustment, *see* Psychological maladjustment
England, child welfare work in, 283–84
economic conditions, 131–32, 133, 135, 136 ff., 139–40, 151–52
poor relief, history of, in, 127 ff.
Environmental change, as social work service, 26
Equipment, material, as part of social work institution, 57 ff.
Evacuation, wartime, psychological effects, 506–07
Everett, Edith, "Social Work in the School," discussed, 379
———, *et al., Visiting Teacher Service Today,* discussed, 379
Extra-agency organization of social work, described, 50–51

F

Family, as client of social agencies, 22, 23
difficulties in, life, 93
function of, 73, 74, 75, 87 ff., 257
handicaps in, 90 ff.
incomes, 279 ff.
as part of social organization, 73
psychological maladjustment in, 91
relief grants to, 279–80
sanitary conditions in, 280
as socializing agency, 387 ff.
social work services to, 92 ff., 121
substitutes for, 87 ff.
———, services, 89
and World War II, 505 ff.
Family relationships, assistance in, by welfare agencies, 256–57
———, illustrative case, 268 ff.
Family Social Work and the Community, discussed, 206
Family welfare agencies, activities, 248 ff.
educational activities, 95
financial assistance by, 92
function of, 92
material equipment, 57 ff.
nonfinancial assistance, 252 ff.
———, illustrative cases, 252 ff.
personnel of, 48
services of, 92, 176–77
Family Welfare Association, 51, 172
advisory services, 188
Family welfare societies, engage in child welfare work, 319
Family welfare work, aims, 175, 177
bibliography, 274–75
client's psychology, 259–60, 261, 263–64
as distinguished from child welfare work, 276–77
Family welfare work, as distinguished from public assistance, 225
financial assistance, 249–50
———, illustrative cases, 250 ff.
group work in, 272 ff.
———, illustrative case, 273–74
history, 172, 174–75
methods, 174–75, 257 ff.
———, illustrative cases, 264 ff.
not limited to financial assistance, 250
present system, 246 ff.
psychiatry, influence of, on, 174
purpose of, 246 ff.
Federal Emergency Relief Administration, organization, 219–20
policy, 221
Feeble-minded persons, as clients of social agencies, 23
Financial assistance, as means of relieving social difficulties, 23
objectives, 153
as service of family agencies, 177
as social work service, 24
Fink, Arthur E., *The Field of Social Work,* discussed, 379, 481
Fire relief, *see* Disaster relief
Fitch, John C., "The Nature of Social Action," discussed, 515
on social action, 41n.
Flood relief, *see* Disaster relief
Foreign birth, as obstacle to social adjustment, 79
Foreigners, *see* Immigrants
Foster care, facilities, 331–32
as social work service, 26
and social work, 89–90
Foster homes, as family substitutes, 88
history, 291 ff.
present system, 296n.
as social work service, 26, 341–42
———, illustrative cases, 342 ff.
Foundations, in medical charity, 131–32
French, Lois Meredith, *Trends in Psychiatric Social Work,* discussed, 457
French societies, as charity organization, 158
Freud, Sigmund, on human behavior, 465
on sexual impulses, 69n.
"Friendly visitors," 159, 161, 162
Function, as distinguished from purpose, 75n.
Fund-raising, in social work, 36

G

Gartland, Ruth, *Psychiatric Social Service in a Children's Hospital,* discussed, 481
German societies, as relief organization, 158

Girls' Service Leagues, activities, 196–97, 396
Glassberg, Benjamin, *Across the Desk of a Relief Administrator,* discussed, 513
Graves, Marion, "Some Aspects of Psychiatric Social Work, etc.," discussed, 457
Group, The, a monthly bulletin, 45
Group work, *see* Social group work

H

Hall, G. Stanley, starts child study movement, 171
Hamilton, Gordon, *Social Case Recording,* discussed, 65
Harnack, Adolf von, "History of Dogma," discussed, 155
Hartley, Isaac Smithson, on poor relief in the United States, 159
Hartwell, Samuel W., *Fifty-five Bad Boys,* discussed, 481
Health, and economic conditions, 280–81
Healy, William, *The Individual Delinquent,* discussed, 421, 460
Hebrew Sheltering and Immigrant Aid Societies, activities, 197
Hertzler, J. O., *Social Institutions,* discussed, 44
Hill, Esther P., *Socially Handicapped Children, etc.,* discussed, 354
———, Octavia, on poor relief, 149
Hollis, Florence, *Social Case Work in Practice,* discussed, 274
Home economist, in family welfare agencies, 49
Homeless persons, as clients of social agencies, 22–23, 26
Hopkins, Harry, on inadequacy of public assistance, 221
Hospital insurance, 92
Hospitals, administrative activities as social work in, 491 ff.
  group work activities, 105
  and individual, 82
  in medieval charity, 131
  social work in, 111, 199–200, 423 ff.
  see also Medical services
Hull House, activities, 43

I

Ignorance, as obstacle to social adjustment, 79
Illness, as handicap to family life, 93
  psychological aspects of, 111–12
  social work in connection with, 23, 24, 26–27
Immigrants, Americanization of, 115
  as clients of social agencies, 23
Immigrants, difficulties of, 115
  services to, 115
  and social group work, 31–32
  social work with, 115
Individual, and family, 76–77
  and hospital, 82
  and school, 82
  and social organization, 76 ff.
Informal education, classified, 100
Information, as social work service, 24–25, 27
Inquiries, general method of conducting, 10 ff.
Insane persons, as clients of social agencies, 23
Intake workers, in family welfare agencies, 48–49
Interpersonal relationships, adopted by social workers from psychiatry, 173
  defined, 439
  as distinguished from social relationships, 439
  as factor in mental disorders, 437–38
  see also Relationship, personal
"Interpretation" of social work, 52, 191
Interviews, as part of social case work, 25
Iowa plan, objectives, 215

J

Johnson, Arlien, on state regulation of private social agencies, 53n.
———, Lillian, "Case Work with Children in Institutions," discussed, 421
Judge, function of, 118
  as social worker, 118
Judge Baker Foundation, activities, 460
Junior League, educational activities not social work, 95
Juvenile courts, functions of, 403 ff.
  intake of, 406, 407–08
  social case work in, 405 ff.
  social work in, 27, 118, 403 ff.

K

Kahn, Dorothy, "Conserving Human Values in Relief Programs," discussed, 66
  "Unemployment and Its Treatment in the United States," discussed, 245
Kellogg, Paul U., on history of settlement houses, 115n.
Kelso, Robert, on public welfare, 192
  The Science of Public Welfare, discussed, 66, 206, 245, 307
Kimball, Solon T., *Family and Community in Ireland,* discussed, 84
King, Clarence, *Social Agency Boards, etc.,* discussed, 206

Klein, Philip, defines social work, 6, 20
———, *et al., A Social Study of Pittsburgh,* 45, 206–07
Knauth, Marjorie Strauss, *et al., The Social Component in Medical Care,* discussed, 456
Knowledge, creates additional needs, 72
as part of culture, 71, 73
Kurtz, Russell, *The Public Assistance Worker,* discussed, 245

L

Lane, Marie Dresden, *et al., America on Relief,* discussed, 245
Lane, Robert P., "What Is Community Organization?" discussed, 46
Language, analysis of, 71–72
as part of culture, 71–72, 73
Law, *see* Poor Law
Laws pertaining to social work, 53–54
Libbey, Betsey, on family welfare work, 175
Lieberman, Joshua, *New Trends in Group Work,* discussed, 45
London Charity Organization Society, accomplishments, 151n.
activities, 157
aims of, 151, 153
failure, reasons for partial, 144–45, 150–51
methods used by, 145 ff.
original plan, 142–43, 145–46
policy regarding public relief, 147
purpose of, 38
services, 143–44
social work functions, 143 ff.
"unworthy" poor, attitude toward, 150
Lowry, Fern, "Current Concepts in Social Case Work Practice," discussed, 66, 181

M

McLean, Francis H., *The Family Society, etc.,* discussed, 206
Magic, defined, 72
as part of culture, 72
Malinowski, Bronislaw, classifies social institutions, 74
culture, writings on, 44, 84
defines culture, 69n.
defines magic, 72
defines nation, 115
on functional theory of culture, 65n.
on man's biological needs, 68
on sexual impulses, 70
"Social Anthropology," discussed, 84
on social institutions, 16, 18–19
on sociology of nutrition, 69
Malthus, Thomas R., on poverty, 160
Man, biological needs of, 68 ff.
and culture, 69
Mangold, George B., *Problems of Child Welfare,* discussed, 307
Marcus, Grace, defines social work, 7n.
"The Generic and Specific in Social Case Work," discussed, 181
on psychiatric aspects of family welfare work, 174
"Social Case Work and Mental Health," discussed, 275
Massachusetts, poor relief in, 213
Massachusetts Charitable Fire Society, 158
Material apparatus, as part of social institutions, 47
Medical institutions, changing character of, 78–79
social work in connection with, 111, 121
supplements to private, 92, 94
in wartime, 510–11
see also Hospitals
Medical social work, bibliography, 455–56
history, 424 ff.
methods, 426 ff.
———, illustrative case, 430 ff.
in military hospitals, 510
services of, 26
theory, 426
Medical social workers, professional organization, 521
Mental hospitals, social case work in, 440 ff.
social work in, 26
Mentally handicapped persons, family substitutes for, 88
Mental hygiene clinics, defined, 451
services, 451 ff.
social case work in, 448 ff.
types, 450–51
Mental hygiene movement, objectives, 459–60
origin, 438
Meyer, Adolf, on function of mental hospitals, 450
on mental disorders, 437 ff., 440–41
Michigan, relief administration in, 222
Migrants, as clients of social agencies, 26
Milford Conference, *Social Case Work, etc.,* discussed, 44
Millspaugh, Arthur C., *Public Welfare Organization,* discussed, 207
Monasteries, and medieval charity, 131
Money, as factor in use of social institutions, 78–79, 90–91
lack of, as handicap to normal family life, 90–91
reason for importance of, 87, 88, 93

Money, *see also* Financial assistance, Poverty
More, Sir Thomas, on conditions of rural poor, 134
Mothers' clubs, functions, 92
offer social group activities, 31
Mothers' pensions, 294–95

N

Nation, defined, 115
function of, 77
as part of social organization, 73
National Association for Aid to Dependent Children, objectives, 313
on purposes of aid-to-dependent-children program, 313–14
National Association for the Study of Group Work, 369
National Association for the Study and Treatment of Tuberculosis, 164
National Committee for Mental Hygiene, advisory services, 188
National Conference of Social Work, organization, 21
National Educational-Recreational Council, significance, 369
National Girls' Work Council, 51
National Tuberculosis Association, and community chests, 202
Needs, basic biological, 68 ff.
cultural conditioning of, 69
and family, 77
met by family, 87
Neighborhood, function of, 113
organization, 114
as part of social organization, 73
and social work, 113 ff.
New Mexico, relief administration in, 222
New York, poor relief in, 158
New York Association for Improving the Condition of the Poor, 159
on poverty, 161n.
New York Charity Organization Society, activities, 163–64
New York Children's Aid Society, activities, 291–92
New York Society for the Prevention of Cruelty to Children, functions, 319
New York Society for the Prevention of Pauperism, 158
New York State, mental hygiene clinics in, 451
New York State Charities Aid Association, champions mental hygiene clinics, 42–43
New York Temporary Emergency Relief Administration, on need for trained social workers, 219
North, Cecil Clare, *The Community and Social Welfare,* discussed, 207
Nurses, and schools, 101
Nutt, Alice Scott, "The Future of the Juvenile Court," discussed, 421
NYA, 3

O

Occupational groups, function of, 77
as a social institution, 74
Old-age insurance, as an economic institution, 28–29, 91
Oppenheimer, J. J., *The Visiting Teacher Movement,* discussed, 379
Orange, N. J., Bureau of Charities, activities, 163
Orphan asylums, conditions in, 290
Orphanages, as social work facility, 110
see also Child-caring institutions
Outdoor relief, origin, 215

P

Padley, Richard, *et al., Evacuation Survey,* discussed, 516
Paine, Robert Treat, on aims of charity organization societies, 163
Parent education, classified, 99
organizations, functions of, 92
as a social institution, 29
as social work, 122
Parents, and child guidance clinics, 463 ff.
duties toward children, 477
Parole clinics, 444
Parolees, as clients of social agencies, 23
Parrington, Vernon Louis, on history of social reforms, 166n.
Patten, S. N., on environmental determinism, 162
Pauper's oath, as basis of poor relief, 213–14
Payne, E. George, *et al., The Adolescent Court and Crime Prevention,* discussed, 420
Peabody, Francis, on environmental determinism, 162
Pennsylvania, poor relief in, 213
relief administration in, 222
Personality, development of interest in, 171
Personnel, duties of, 48 ff.
in social work, 47 ff.
Persons, W. Frank, *The Welfare Council of New York City,* discussed, 514–15
Philadelphia, poor relief in, 158
Philanthropy, as distinct from social work, 55–56
Physicians, in schools, 101
use of social workers by, 27
see also Hospitals, Medical institutions
Planning of social work, *see* Community organization

Poor, categorical treatment of, 133, 135, 138, 158, 188, 193–94, 213–14
sent to workhouses, 136
Poorhouses, children in, 286 ff.
conditions in, 287–88
Poor Law, and education, 139
effects of, 141
origin, 132
policy, 138, 139
revolt against, 141
Royal Commissions on, 137–38, 141
Poor Laws, English, 134 ff.
Poor relief, basic problem of, 128 ff., 153
under church, 130
and Depression, 212, 217 ff.
early methods, 130 ff.
economic factors in, 129, 130–31, 134, 135, 136, 139–40, 158–59
as an economic institution, 91
effects of, 138, 139–40, 148
failure of, in 16th century, 134–35
history, 127 ff., 158 ff.
———, in the United States, 213 ff.
medieval, 132–33
———, failure of, 133
methods, 133, 134–35, 142
through public works, 134–35
reforms in the United States, 215
social dangers in, 129
social work and, 129, 144–45, 153–54, 183–84, 211–12
source of funds for, 131, 132, 139
statutes, 133
as supplement to wages, 136
treatment of, in Middle Ages, 131–32
trends in, 130, 135
workhouse test, 138
see also Public assistance
Poverty, beneficial effects of, 137
causes of, 146, 152, 160–61, 164–65, 168, 170, 212
as characteristic of social work clientele, 3, 5, 22, 55, 89
as factor in child welfare activities, 278
as factor in psychiatric treatment, 450
Pray, Kenneth, "The Agency's Role in Service," discussed, 513
on social work administration, 494–95
Predelinquents, 396
Preventive work, as social work activity, 20–21
Prisoners, as clients of social agencies, 23
Private agencies, defined, 50n.
legal control over, 53
subsidies, 53
Probation, as distinguished from social work, 63
Probationers, as clients of social agencies, 23
Probation officer, duties of, 118 406–07
methods of, 411 ff.
as social worker, 118
Probation work, social work in, 409 ff.
Proceedings of the Conference on State Child Welfare Services, discussed, 354
Professions, defined, 6
and knowledge, 54
social action by, 41, 42
Protective work, defined, 191
Psychiatric social work, 434 ff.
bibliography, 456–57
as distinguished from psychotherapy, 438 ff.
history, 171 ff.
in military hospitals, 510
services, 443 ff.
———, illustrative case, 446 ff.
Psychiatric social workers, professional organization, 521
Psychiatrists, in schools, 101–02
Psychiatry, contrasted with social work, 112, 121, 176
dynamic, 442–43
family care for patients, 444–45
function of, 98
and organic disease, 438n.
principles of, used in social work, 170 ff., 173
social aspects, 435 ff.
Psychological adjustment, defined, 81
Psychological maladjustment, as obstacle to social adjustment, 79, 80, 91, 93
Psychologists, in schools, 101
"Psychosomatic" medicine, 438n.
Psychotherapy, by discussion groups, 106
as distinguished from psychiatric social work, 438 ff.
as distinguished from social work, 107
group work in, 370–71
Public assistance, administration, 222–23
for aged, 239–40
amount of, 279–80
for blind, 240
categorical, 238 ff.
———, illustrative case, 238–39
for dependent children, 240–41
as distinguished from family welfare work, 225
as distinct from social work, 63
eligibility for, 225
financial sources, 194
history, 217 ff.
inadequacy of, 221, 224
methods of, 218 ff.
not a social work institution, 226, 242 ff.
present system (1941), 221 ff.
psychological aspects, 231 ff.
———, illustrative case, 234 ff.

Public assistance, relief policies, 223–24
relief rolls, size of, 223
service limited, 228–29
and social case work, 211 ff., 228 ff.
and "social treatment," 225
social work in, 14, 191, 242 ff.
social workers, need for trained, in, 227
———, illustrative case, 236 ff.
volume, 220
works programs, 221
Public assistance agencies, administration, 193 ff., 493 ff.
organization, 193 ff.
personnel, 49
Public health departments, social work in, 112
Public health programs, classified, 110
Public welfare, activities, 192 ff.
———, as distinct from social work, 40–41
agencies as social institutions, 192–93
defined, 40, 191–92
organization in the United States, 193 ff.
socialization, 215
Public welfare administration, activities, 40–41, 157, 192 ff.
bibliography, 46
as social work activity, 21, 40
Public works, as poor relief, 134–35
Puritans, on poverty, 160
Purpose, as distinct from function, 75n.

Q

Queen, Stuart Alfred, defines social work, 7n.
Social Work in the Light of History, discussed, 108, 181, 513

R

Records in social work, financial, 59–60
individual cases, 60–61
Recreation through discussion groups, 106
as social group work, 30, 367, 375–76
———, illustrative case, 376 ff.
and social work, 102 ff., 371 ff.
———, illustrative case, 373–74
objectives, 115
Red Cross, and community chests, 202
Home Service divisions, 171, 197, 508–09
services, 197
as a social agency, 187n.
wartime activities, 508–09
Regensberg, Jeannette, "An Attempt to See Case Work Apart from Related Professions," discussed, 109
Relationship, personal, as agent in social treatment, 168, 169
Relief, *see* Poor relief, Public assistance
Relief administration, attitude toward social workers, 226 ff., 243
Religion, as part of culture, 72
as a social institution, 77
Religious groups, and child welfare, 304
Research, early, in Boston, 302
as part of social work, 35, 123, 184, 204–05
plan of, used in this study, 10 ff., 16–17, 19, 20, 47, 64, 86–87, 120, 482
Reynolds, Bertha Capen, "The Adaptation of Newer Concepts of Generic Case Work to Medical Social Work," discussed, 456
on character of social case work, 179
defines social work, 7n.
"Re-thinking Social Case Work," discussed, 181, 515
on scientific character of social case work, 56
Rich, Margaret, *Current Trends in Social Adjustment through Individual Treatment,* discussed, 181
on family welfare work, 177
Richmond, Mary E., defines social work, 7
The Long View, discussed, 46
on probation work, 411–12
on social diagnosis, 166–67
Social Diagnosis, discussed, 181
on socialization of public welfare, 215
on social work activities, 20
What Is Social Case Work? 44
Robinson, Virginia, *A Changing Psychology in Social Work,* discussed, 181–82
Roethlisberger, F. J., *Management and Morale,* discussed, 516
Roosevelt, Franklin D., on unemployment, 218–19
Ryan, Carson, *Mental Health through Education,* discussed, 379

S

Salvation Army, services, 197
Sanborn, Frank, on environmental determinism, 162
Sayles, Mary B., *The Problem Child in School,* discussed, 379
Substitute Parents, discussed, 354
Schools, administrative activities as social work, 491 ff.
and child welfare work, 356 ff.
functions, 77, 92
and immigrants, 115
and individual, 82
and nurses, 101
and physicians, 101
and psychiatrists, 101–02
and psychologists, 101

Schools, social work in, 26, 27, 100 ff., 199–200
Schools of social work, activities, 51
and American Association of Social Workers, 51
association of, 51
Science, as basis of social work, 55–56
Selective service, social work in, 508–09
Services to the Armed Forces, discussed, 207
Settlement houses, activities, 106, 114, 115, 195–96
aims of, 32–33
educational activities, 95
history, 114–15
objectives, 114
offer social group activities, 31
Sheffield, Ada Eliot, *Social Insight in Case Situations,* discussed, 44–45
Slavson, S. R., *Character Education in a Democracy,* discussed, 379–80
"The Group in Development and in Therapy," discussed, 45
Smalley, Ruth, "Interview with a Child," discussed, 380
Smith, Lucille Martin, "Service Aspects of Public Assistance Administration, etc.," discussed, 46
Smith, T. Lynn, "Trends in Community Organization and Life," discussed, 123
Social, as distinguished from psychological, 81, 83
defined, 81 ff.
Social action, activities, 41 ff.
bibliography, 46, 515
history, 157, 164
purposes of, 42
as social work activity, 21, 41, 42–43, 123, 204–05, 498 ff., 500–01
see also Social reform
Social adjustment, defined, 81
obstacles to, 78 ff., 128–29, 175
see also Psychiatry
Social agencies, activities, 48, 110
administration, 199–200
case committees, 189
clients, 190
co-ordinating, 38
dependence of individuals on, 183–84
directors, 188–89
function, 86, 179–80, 225–26
legal regulations, 53
organization, 188, 194–95, 198, 199–200
personnel, 189–90, 198
private, 187 ff.
———, relief policies, 226
protective work of, 191
public, 187, 191 ff., 202–03
———, relief policies, 226
Social agencies, publicity, 190–91
regulation of fund-raising activities, 53
service in small cities, 59
as a social institution, 184n., 186, 187 ff.
sources of funds for, 188, 193
types of, 184 ff., 195–96, 198–99, 202
see also Family welfare agencies, Child placement agencies, Charity organization societies
Social case work, in aid to dependent children, 311 ff.
aims, 112, 176
attitude toward poor relief, 216–17
bibliography, 44–45
characteristics of, 21 ff., 28
in child guidance clinics, 463 ff.
———, illustrative case, 470 ff.
clients, 22–23
defined, 7n., 21
in delinquency, 397–98
———, illustrative cases, 398 ff.
development of, 183–84
eras of, 160, 161–62, 168, 170, 171, 176
history, 147 ff., 156 ff.
in juvenile courts, 405 ff.
in London Charity Organization Society, 143
methods of, 28–29, 164–65, 166, 179–80, 470
———, illustrative case, 470 ff.
present philosophy, 178 ff.
principles of, 25, 27, 28, 57, 60–61, 98, 116, 161, 166, 168, 171–72, 173, 178, 190–91, 228 ff.
in psychiatry, 440 ff.
psychiatry, influence of, on, 170 ff.
in public assistance, 211
in recreational activities, 371 ff.
———, illustrative case, 373–74
in schools, 357 ff.
services, 24 ff., 93, 112, 118, 119–20, 180, 186–87
as social work activity, 20–21, 211n.
theory of, 25, 97–98, 162, 167, 169, 173, 176, 178, 259
Social Case Work: Generic and Specific, discussed, 182
"Social Case Work with Children," discussed, 355
Social diagnosis, sources of, 166–67
Social difficulties, as basis of social work, 23–24
Social disabilities, nature of, 67 ff.
Social group work, activities, 29 ff.
agencies, personnel of, 49
bibliography, 45
in community life, 32
cottage plan, 370–71
cultural, 31–32

Social group work, defined, 29–30
education, as distinct from, 99–100, 116
educational, 30, 33–34
in family welfare work, 272 ff.
———, illustrative case, 273–74
fights delinquency, 33
history, 157
informal education, 367 ff.
objectives, 195–96, 369–70
professional organization, 522
in psychotherapy, 370–71
recreational, 30, 31, 33–34, 367, 375–76
———, illustrative case, 376 ff.
and social case work, 33, 34
as social work activity, 20–21, 114–15
theory of, 33, 368 ff.
therapeutic, 32–33, 34
uses for, 370
Social institutions, charter, 19
defined, 47
functions, 16, 62, 63, 73 ff., 78
interrelationship of, 91, 92, 98, 121, 128–29, 133
material apparatus, operated by, 19
nature of, 64
obstacles to use of, 78 ff., 80–81, 111, 116
social agencies as, 89n.
social work as, 47 ff., 63–64, 121, 374–75
theory of, 16, 57, 128, 184n., 186, 205–06
types, 73 ff.
use of, by individuals, 82
value of establishing social work as, 62
see also Social organization
Social insurance, as an economic institution, 28–29
theory of, 212
Socialized medicine, 92
Social maladjustment, defined, 81 ff.
and war, 510
see also Social adjustment, Social relationships
Social organization, benefits to individual of, 76 ff.
dependence of individual on, 68 ff., 75–76
forms of, 73 ff.
function, 72–73
need for, 68 ff., 79–80
see also Social institutions
Social reform, as aim of social work, 161 ff.
as social work activity, 20–21
see also Social action
Social relationships, as basis for social work, 84
causes of difficulties in, 82–83, 85 ff., 170
Social relationships, defined, 81 ff., 112–13
as distinct from interpersonal relationships, 97–98
Social research, as social work activity, 20–21
Social resources, collaboration of, 169n.
defined, 168
Social security, 3
Social Security Act, and child welfare, 294, 320
objectives, 221–22
Social Security Board, controls aid-to-dependent-children program, 310
Social service exchange, 50
Social treatment, as distinguished from psychological, 98, 111–12, 121
methods of, 161, 166, 168–69, 175
Social welfare work, as distinct from social work, 96, 110, 161
facilities, 485–86
functions, 39
objectives, 484
organization, *see* Community organization
planning of, 35
as social work activity, 20
Social work, activities, 18 ff., 24 ff., 43
administrative aspects, 40–41, 490 ff.
———, bibliography, 513–14
and aid-to-dependent-children program, 310 ff.
aims of, 14–15, 42, 55, 156, 168, 170, 178–79, 183–84, 205
analysis of, *see* Research, proposed method of
in army camps, 509
attitudes toward, 191
auxiliary activities, 483, 489–90
as a career, 519 ff.
characteristics of, 28–29, 43, 50, 62, 95–96, 99–100, 105–06, 120, 122, 161, 205–06
charity, as distinct from, 50, 55–56, 62
charter, 52 ff.
charter of values, 157
in child-caring institutions, 337 ff.
in child guidance clinics, 458 ff.
and child welfare work, 282 ff., 297 ff., 308 ff.
community organization as, 35 ff., 495 ff.
co-ordinated character, 47 ff.
in correctional institutions, 415 ff.
———, illustrative case, 418 ff.
current philosophy, relation to, 160, 162, 165
in custodial institutions, 199
in day nurseries, 333–34

Social work, illustrative case, 334 ff.
definitions, 5 ff., 42 ff.
———, difficulty of, 3, 11, 13–14, 20–21, 64, 67, 96, 170
with delinquents, 381 ff., 393 ff.
in discussion groups, 105–06
and education, 95 ff.
education, as distinguished from, 272n.
extra-agency organization of, 51–52
family, services to, 92
and family substitutes, 89–90
as a field of practice, 501–02
financial aspects, 55
and foster care, 90
in foster homes, 341–42
———, illustrative cases, 342 ff.
functions of, 40, 67, 83–84, 85 ff., 94, 98, 103–04, 110 ff., 120 ff., 183–84, 201, 482–83, 486 ff.
future of, 502 ff.
in hospitals, 199–200
and individual service, 28–29
"interpretation" of, 52
journals discussing, 516
in juvenile courts, 403 ff.
and juvenile delinquency prevention, 361–62
legal aspects, 53–54
literature, 52
in London Charity Organization Society, 143
material apparatus, 57 ff.
medical, 423 ff.
method of analyzing function in, 47, 85 ff.
in military hospitals, 510
nature of, 489–90, 501, 502
neighborhood, 113 ff.
objective, 148–49, 156, 217
organization of, 47 ff.
organizations, 183 ff.
origin, 142 ff., 156–57
and parent education, 122
permanent need for, 502 ff.
personnel, 13, 47 ff.
philanthropy, as distinct from, 55–56
and poor relief, 145, 211–12
and postwar activities, 510–11
principles of, 55
probation, as distinct from, 63
professionalization, 56
professional organization, 521–22
psychiatric, 434 ff.
psychotherapy, as distinct from, 107
public assistance, as distinct from, 63
and public assistance, 224 ff., 242
and public health departments, 112
publicity, 52
Social work, records, need for, 59–60
and recreational programs, 102 ff., 108, 371 ff.
———, illustrative case, 373–74
rules of conduct, *see* Charter of social work
schools of, 51, 190, 522–23
in schools, 100 ff., 199–200
scientific character of, 56–67, 179
in selective service, 508
services, 4, 119, 120, 122
"settled" aspects of, 15, 43, 61–62
social action as, 498 ff.
as a social institution, 16, 18 ff., 47 ff., 62 ff., 67, 74, 90, 121, 156, 241, 486 ff., 500–01, 502
and social relationships, 84
social welfare activities, as distinct from, 39, 110, 161, 484 ff.
specialization in, 205
state, in connection with, 117 ff.
technical rules, 55 ff.
theory of, no unified, 263
therapeutic play groups as, 105 ff.
unclear aspects, 12 ff., 205
and unemployment, 220
values of, 6, 14–15, 54 ff.
and visiting nurse associations, 112
wartime activities, 505 ff.
see also Community organization, Medical social work, Public welfare administration, Social case work, Social group work
Social workers, activities other than social work, 41, 95–96
characteristics, 12
degree requirements, 520
duties of, 4, 224–25
employment opportunities, 520–21
foster care, work in connection with, 89–90
mode of operation of, 184
need for, 219, 226–27
———, illustrative cases, 227, 236 ff.
number of, 13
persons classified as, 12–13
and poor relief, 212
professional organization, 521
psychology of, 261
———, illustrative case, 322 ff.
qualifications, 48–49, 520
as representative of their agency, 229–30
———, illustrative case, 230–31
salaries, 521
in schools, 102, 357 ff.
training of, 51–52, 190, 194–95; 519 ff.
types, 48–49
as visiting teachers, 357 ff.

Social Work Yearbook, on boys' and girls' clubs, 109
lists extra-agency organizations, 51
on group work, 109
on recreation, 109
on visiting teacher work, 109
Society, composition of, 75
needed by individual, 75–76
Standards for Child Protective Organizations, discussed, 355
State, function of, 77, 117
as part of social organization, 73
as a social institution, 117–18
social work in connection with, 117 ff.
States (of U.S.), relief administration in, 222
relief policies, 222
Statutes of Laborers, 133
Stevenson, George, *et al., Child Guidance Clinics,* discussed, 481
———, Marietta, *Public Welfare Administration,* discussed, 513
Strachey, Amy St. Loe, *Bereaved Children,* discussed, 516
Street, Elwood, *The Public Welfare Administration,* discussed, 207
Superintendents, in family welfare agencies, 48
Supervisors, in family welfare agencies, 48
Swift, Linton B., defines social work, 6

T

Taft, Jessie, "Foster Home Care for Children," discussed, 355
Therapeutic play groups, function of, 105 ff.
organization, 106
"This Business of Relief," discussed, 245
Thornton, Janet, *et al., The Social Component in Medical Care,* discussed, 456
Thurston, Henry W., on child indenture, 286n.
The Dependent Child, discussed, 307
on economic factor in child welfare activities, 279n.
Todd, Helaine, on purpose of social work, 180
Towle, Charlotte, "Social Content of Work for Crippled Children," discussed, 456
"Professional Skill in Administration," 513–14
Social Records from Psychiatric Clinics, discussed, 481
Toynbee Hall, first settlement house, 146
Trade unions, function of, 77
Training schools, *see* Correctional institutions
Travelers, as clients of social agencies, 23
Tuckerman, Joseph, on poverty, 162

U

Unconscious, motivates much of human behavior, 173–74
Unemployment, attitude toward, 218 ff.
Unemployment insurance, as an economic institution, 28–29, 91
Unmarried mothers, as clients of social agencies, 22, 23, 26
family substitutes for, 88
Urban League, activities, 197
as a social agency, 187n.
United States, economic conditions, 158
health standards, 280–81
poor relief system before 1930, 213 ff.
private charity, history of, in, 158 ff.
public welfare organization, 193
relief grants, 279–80
sanitary conditions, 280
schooling, 280
United States Government Manual, discussed, 207

V

Values, in 19th century, 142
as obstacles to social adjustment, 79
as part of culture, 71, 73
Van Kleeck, Mary, "Case Work and Social Reform," discussed, 46
"The Professional Organization of Social Work," discussed, 66
Visiting nurse associations, and social work, 112
Visiting teachers, defined, 357
and delinquency prevention, 361–62
duties, 359 ff.
services, 363 ff.
———, illustrative cases, 364 ff.
Vives, humanist, draws up poor relief plan, 134

W

War relief, social work in, 23
Washington Charity Organization Society, activities, 163
Watson, Frank Dekker, *The Charity Organization Movement in the United States,* discussed, 182
on social treatment, 168–69
Webb, Sidney and Beatrice, *English Poor Law History,* discussed, 155
on English poor relief, 135
on London Charity Organization Society, 151
on poor relief, 137, 150
Weiss, Hans, on probation work, 412
What Councils of Social Agencies Do, discussed, 207

Whitehead, Alfred North, on knowledge, 54
on social work, 54
White House Conference, on child welfare, 216
The Delinquent Child, discussed, 421
The Handicapped Child, discussed, 456
"White House Conference on Child Health and Protection, 1930," discussed, 515
White House Conference, 1940, *Children in a Democracy,* discussed, 66
Williamson, Margaretta, *The Social Worker in Child Care and Protection,* discussed, 355
The Social Worker in the Prevention and Treatment of Delinquency, discussed, 421–22
Winnicott, D. W., on wartime evacuation, 507
Witmer, Helen Leland, *Psychiatric Clinics for Children,* discussed, 46, 422, 481
Wood, Martha C., "The Effective Organization of Social Forces, etc.," discussed, 515
Workers' education, classified, 100
Workhouses, children in, 139
as refuge of poor, 136
Workhouse test, 138
Workmen's compensation, as an economic institution, 28–29
Work relief programs, as an economic institution, 91
World War I, and social reforms, 166
World War II, and family life, 505 ff.
and social work, 505 ff.
WPA, 3

Y

Yearbook of the National Probation Association, discussed, 422
Y.M.C.A., educational activities, 95
membership, 33
Young, Robert A., "A Summer Camp as an Integral Part of a Psychiatric Clinic," discussed, 380
Y.W.C.A., activities, 106
social work, 195